DOCUMENT RESUME

ED 206 957 CG 015 395

TITLE	Prevention Program Management. Participant Manual.
INSTITUTION	National Drug Center for Training and Resource Development (DHHS/PHS), Washington, D.C.; University Research Corp., Bethesda, Md.
SPONS AGENCY	National Inst. on Drug Abuse (DHHS/PHS), Rockville, Md.
REPORT NO	NDACTRD-80-00119
PUB DATE	Mar 81
CONTRACT	NIDA-271-79-4719
NOTE	310p.; For related document, see CG 015 394.
AVAILABLE FROM	Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402 ($8.00).
EDRS PRICE	MF01/PC13 Plus Postage.
DESCRIPTORS	Administrator Education; Administrators; Change Strategies; *Drug Abuse; *Management Development; Minority Groups; *Planning; *Prevention; *Program Improvement; *Skill Development; Training Methods; Workshops

ABSTRACT

This training package, which centers on effective management and the operation of valid prevention programs, presents a five-day training experience designed to help managers of substance-abuse prevention programs. In this participant manual, the introduction includes a list of program goals and objectives and a summary of the ten individual training modules. Outlines for each module list goals, objectives, materials, and exercises. Figures, worksheets, selected readings, and bibliographies are also provided. The materials focus on the components of prevention, program management, change strategies, management tools, networking and interagency collaboration, special populations, resource development, action planning, and burnout prevention. (NRB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

PARTICIPANT MANUAL

PREVENTION PROGRAM MANAGEMENT

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

NATIONAL DRUG ABUSE CENTER FOR TRAINING AND RESOURCE DEVELOPMENT

National Institute on Drug Abuse
Division of Training
5600 Fishers Lane
Rockville, Maryland 20857

NATIONAL INSTITUTE ON DRUG ABUSE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC HEALTH SERVICE

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

PREVENTION PROGRAM MANAGEMENT

PURPOSE

The purpose of Prevention Program Management is to provide those individuals who have current management responsibility for drug abuse prevention programs with practical information on and practice in programming, managing, planning, resource developing and dealing with the needs of special populations for the continued maintenance and growth of their programs.

AUDIENCE

This training program is designed for individuals who carry operational or management responsibility for drug abuse prevention programs.

LENGTH OF COURSE

Prevention Program Management is designed as a five-day course.

COURSE MATERIALS

Trainer Manual

- The Trainer Manual is designed to be used in conjunction with the Participant Manual. The Trainer Manual includes (exclusive of front matter) a sequence of topical areas and exercises, instructions for conducting the various activities, and approximate times required for each activity.

- The Trainer Manual allows for flexibility in the delivery of Prevention Program Management for specific training groups. However, the training team must engage in a planning process prior to the training event.

Participant Manual

- The Participant Manual has two primary purposes: (1) to provide the articles that are essential to understanding the content areas of the course and (2) to provide the directions, tests, and other forms that participants need.

- The directions in the Participant Manual are intended to supplement those given by the trainer(s).

Permission has been obtained from the copyright holders to reproduce certain quoted material as noted in the text. Further reproduction of this material is prohibited without specific permission of the copyright holder. All other material contained in this publication is in the public domain, and may be used and reprinted without permission. Citation as to source is appreciated.

Some articles are adaptations of copyrighted material and may be copyrighted. Before reprinting, readers are advised to determine the copyright status of all such materials.

This publication was developed by the National Drug Abuse Center for Training and Resource Development. NDACTRD is administered by University Research Corporation, under contract number 271-79-4719 for the Manpower and Training Branch, National Institute on Drug Abuse. For further information, write:

The National Drug Abuse Center for Training
and Resource Development
5530 Wisconsin Avenue, N.W.
Washington, D.C. 20015

NDACTRD Publication No. 80-00119
Printed March 1981

TABLE OF CONTENTS

	Page
INTRODUCTION	1
MODULE I: ORIENTATION, OVERVIEW, AND CLIMATE SETTING	7
Goals and Objectives	9
Module I Overview	10
Scheme of the National Training System	11
Successes, Needs, Expectations Worksheet	12
A Basic Prevention Library	13
Pretest	17
Pretest Answer Sheet	23
MODULE II: PREVENTION: YESTERDAY, TODAY, AND TOMORROW	25
Goals and Objectives	27
Module II Overview	28
NIDA's Drug Abuse Prevention Definition	29
Definitions of Primary Prevention	31
Critical Incidents in the Growth of Drug Abuse Prevention	34
Drug Abuse Program Continuum	35
Prevention Programs	36
Defining Prevention Worksheet	37
Multicultural Drug Abuse Prevention Implementation Design	38
MODULE III: PROGRAM MANAGEMENT THEORY AND PRACTICE	39
Goals and Objectives	41
Module III Overview	42
Ten Domains for Understanding Organizations Worksheet	43
Management Functions	44
Matching Managerial Style to Group Readiness Level	46
"Ten Domains for Understanding Organizations" by Leroy Wells, Jr.	47
MODULE IV: MANAGERIAL STYLE AND PLANNING FOR CHANGE	59
Goals and Objectives	61
Module IV Overview	62
Scoring the Managerial Style Profile	63
The Managerial Style Profile	67
"Planned Renegotiation: A Norm-Setting OD Intervention" by John H. Sherwood and John C. Glidwell	71
MODULE V: MANAGEMENT TOOLS	81
Goals and Objectives	83
Module V Overview	84
The Real/Ideal Worksheet	85
Writing Specific Program Objectives: A Self-Instructional Learning Package Worksheet	87

Page

Planning Ahead Worksheet 94
Needs Assessment Process 95
Functional Analysis of the Prevention Planning Process 96
The Ideal Evaluation Plan 97
"Conducting a Community Assessment"
by William H. Wheeler, Ph.D. 99
NPERN Guidelines 143
Where Politics and Evaluation Meet 161

MODULE VI: NETWORKING AND INTERAGENCY COLLABORATION . . 175

Goals and Objectives 177
Module VI Overview 178
Profile of a Nurse 179
Profile of a Sheriff 180
"Interagency Collaboration" by the Interagency Collaboration
Project 181
"Social Systems Relatedness Techniques" by the Interagency
Collaboration Project 205
"Role Behavior Needs" by the Interagency Collaboration Project . . 209
Networks: A Key to Person-Community Development
by Dr. Ann Dosher 213

MODULE VII: TARGETING PROGRAMS FOR SPECIAL POPULATIONS . . 221

Goals and Objectives 223
Module VII Overview 224
CMA Social COMPASS Worksheet 225
What Do We Really Know Worksheet 226
Questions for Further Research Worksheet 227
Program Planning Worksheet 228
Special Target Populations 232

MODULE VIII: RESOURCE DEVELOPMENT AND GRANTSMANSHIP 233

Goals and Objectives 235
Module VIII Overview 236
Win As Much As You Can Tally Worksheet 237
Needs/Sources Chart 239
"Catalog of Federal Domestic Assistance" 241
"The Foundation Directory" 247
"Is There Life After Seed Money?" by Harriet Bogard 253
"Researching Corporate Gifts" 267
"Proposal Writing Outline" by Don Nelson and Grant Shumway . . . 279

MODULE IX: ACTION PLANNING PROGRAM GROWTH 285

Goals and Objectives 287
Module IX Overview 288
Program Planning Worksheet 289

Page

MODULE X: PREVENTING BURNOUT 293

Goals and Objectives 295
Module X Overview 296
Staff Burnout As a Form of Ecological Dysfunction 297
Post-test 311
Post-test Answer Sheet 318

INTRODUCTION

Rationale

Prevention Program Management is a revision of the National Drug Abuse Center for Training and Resource Development training package, Prevention: A Course for Local Program Survival, developed by Ann Bauman in 1977.

These revisions reflect the growth and maturity of the prevention field during the past 3 years, and are symbolized by the title change. No longer does the focus of prevention need to be survival. The concerns of prevention professionals now center on effective management and the operation of sound and valid programs. The issues are maintenance and growth, rather than survival.

The content revisions echo this development: the revised course is designed to utilize information and knowledge derived from theories of generic management and organizational development, new resources within the prevention field, additional opportunities to build upon the successes and experiences of program managers, and practical applications of prevention and management concepts to issues of program growth.

The Prevention Program Management training program is based on the assumption that, once established, prevention programs are subject to the same principles that govern all organizational life. Without special regard to the unique nature of programmatic elements (e.g., change focused on the individual, change focused on some aspect of the social environment, etc.), the dynamic forces that impinge on drug-abuse prevention programs are the same forces that impinge on all organizations.

This course has been influenced by the theories of organization developed by Weber (1957), Etzioni (1963), and Rice (1973), and extended by Wells (1974) and others. These theories describe the primary goals and objectives that any organization must achieve in order to maintain itself and to accomplish its tasks effectively. The major propositions of this group of theories are:

- The organization must have primary tasks and purposes that justify its existence.
- The forms and processes of an organization must be consistent with the social structure within which the organization exists.
- The organization and its goals and objectives must be consonant with the cultural environment in which the organization exists.
- The organization must have a means of generating and allocating resources that is consistent with the goals and objectives of both the organization and the social and political climate of its community.
- The organization must have the appropriate technology (human competence, technical skills, and material) to support the work of the enterprise.

- The organizational form must include clear definition and assignment of work based upon a division of labor in combination with a division of authority.

- The organization must have the means to evaluate the effectiveness of its work. It must be able to evaluate its effectiveness from within (efficiency of process), and from without(impact on clients and community).

Finally, the training program assumes that program survival can be approached in much the same way as drug-abuse prevention--by focusing on growth, at the organizational, community, and staff levels. Prevention Program Management is designed to provide both specific and generic knowledge about drug abuse prevention and skills to the individuals who are responsibile for the survival of these programs.

Course Description

Prevention Program Management is a 5-day training experience designed to help managers of substance-abuse prevention programs to maximize the efficiency and effectiveness of their programs. The course emphasizes the need to plan for continued growth by increasing resource utilization in current programs, improving individual management and planning skills, and exploring alternative program strategies, funding sources, and efforts directed at special populations.

The intention of the course is to provide practical information that has been tailored and adapted to the experiences, philosophies, and issues of the training participants. Theories are presented that will encourage participants to examine creative options in programming, management, and planning which will make a difference in their individual situations.

Prevention Program Management, like the prevention field itself, depends upon the energy and commitment of the trainees; the success of the training experience relies upon the willingness of the participants to share their experiences, successes, and frustrations, their openness to new program and management opportunities, and their application of the experiences of the training to their work environment.

Course Goals

The overall goal of this course is to provide those individuals, who have current operational or management responsibility for ongoing drug-abuse prevention programs, with the knowledge and skills necessary to keep the program moving ahead. To realize this goal, the course will provide participants with the opportunity to gain an understanding of:

- Effective drug abuse prevention strategies.

- New directions in drug abuse prevention.

- Multicultural considerations in drug abuse prevention.

- Networking and inter-agency collaboration.
- Human services management and organizational development.
- Grantsmanship and alternatives to grants.
- New resources in needs assessment, planning, and evaluation for drug abuse prevention programs.

The course is also designed to develop and enhance participants' skills in:

- Community organization
- Program management
- Fund raising
- Public relations
- Working with other agencies and organizations
- Goal-setting
- Problem-solving
- Resource identification and utilization.

Module Summary

MODULE I — This module orients participants to the training program, helps to develop a climate conducive to learning, and provides an opportunity for participants to exchange information. The pretest is also conducted during this module.

MODULE II — The history of drug abuse prevention and definitions of prevention are covered. The concept of critical incidents that contribute to or mitigate against survival and growth of prevention programs is presented and explored. Participants are given the opportunity to share program growth strategies.

MODULES III & IV — These modules relate drug abuse prevention programming to the body of knowledge concerning organizational development. The modules incorporate situational leadership theory, Sherwood's model of planned renegotiation, and Leroy Wells' Ten Domains for Understanding Organizations in an overview of management theory. Participants are given the opportunity to examine their prevention programs in light of the management theory presented and to graph their own personal management/leadership styles.

MODULE V — The concepts and applications of needs assessment, planning, and evaluation are presented to acquaint participants with the program development process. Time is allotted for practice in developing program objectives and setting short- and long-term goals.

MODULE VI — This module differentiates between the concepts of inter-agency collaboration and networking and describes techniques and strategies that program managers can use to

overcome obstacles and improve networking and collaboration efforts. Participants are afforded an opportunity to develop a plan for a prevention support network within their communities.

MODULE VII — The core of this module is an experiental laboratory in which teams have the opportunity to design a pilot prevention program for a particular target population. Considerable attention is given to exploring assumptions, opinions, and facts that surround various cultural groups and the implications of these issues for drug abuse prevention programming.

MODULE VIII — This module provides exercises and simulation activities to give participants practice in developing a funding proposal and approaching funding agencies. Material covered includes practical information on fund raising, how to use appropriate resources in trying to obtain support, formulating funding strategies, and proposal planning and development.

MODULE IX — This module is an application of the learnings of the preceding modules. It provides each participant with an opportunity to select a program strategy based on his or her highest-priority program need and to design an action plan for implementing the chosen strategy.

MODULE X — Symptoms and causes of burnout and coping strategies to prevent burnout are presented in this module. It allots time for participants to review their action plans and incorporate appropriate "burnout prevention" strategies. The module concludes with administration of the post-test.

Objectives

At the conclusion of this course, each participant will be able to:

- List five critical incidents in the development of his or her drug-abuse prevention program.
- Identify at least three "developmental issues" common to represented drug-abuse prevention programs.
- Describe at least one successful "coping strategy" for each critical issue.
- List three major 5-year goals for his or her prevention program.
- Identify 1-, 3-, and 5-year milestones for his or her programs.
- Demonstrate his or her familiarity with NIDA prevention planning, needs assessment, and evaluation resources by completing a draft workplan in one of the three areas.

- List at least five other local organizations and agencies in his or her community with whom the potential for collaboration exists.
- Describe the basic assumptions behind networking.
- Develop a plan for a prevention support network within his or her own community.
- Identify at least one program objective which might be achieved through networking or interagency collaboration.
- Identify at least five pieces of information that should be known about a funding source before an approach is made.
- Identify at least two eligibility criteria that any private organization should meet before approaching private or public fundors.
- List at least six categories that should be covered in every proposal.
- Develop a community fund-raising strategy.
- Identify the present stage of organizational development of his or her prevention program in terms of current theory and practice.
- Graph his or her own personal management/leadership style as a prevention program manager.
- Describe a pilot prevention program for a specific target population of his or her choice developed by a team effort in which he or she participated.
- Identify at least five cultural issues which need to be considered in developing programs for special populations.
- Identify his or her highest priority program need and give three reasons for his or her selection.
- Describe a growth strategy which might most effectively address that perceived need.
- Write an action plan to implement that strategy within his or her own program and/or community.
- Identify at least three coping strategies which he or she can utilize for personal and/or organizational replenishment.
- List at least one person within the training and one person outside the group whom he or she can call upon for support.

MODULE I

MODULE I: ORIENTATION, OVERVIEW, AND CLIMATE SETTING **TIME:** 3 HOURS 35 MINUTES

GOALS

- To orient participants to the training program
- To develop a climate conducive to learning
- To provide an opportunity for participants to exchange information about their programs.

OBJECTIVES

At the end of this Module, participants will be able to:

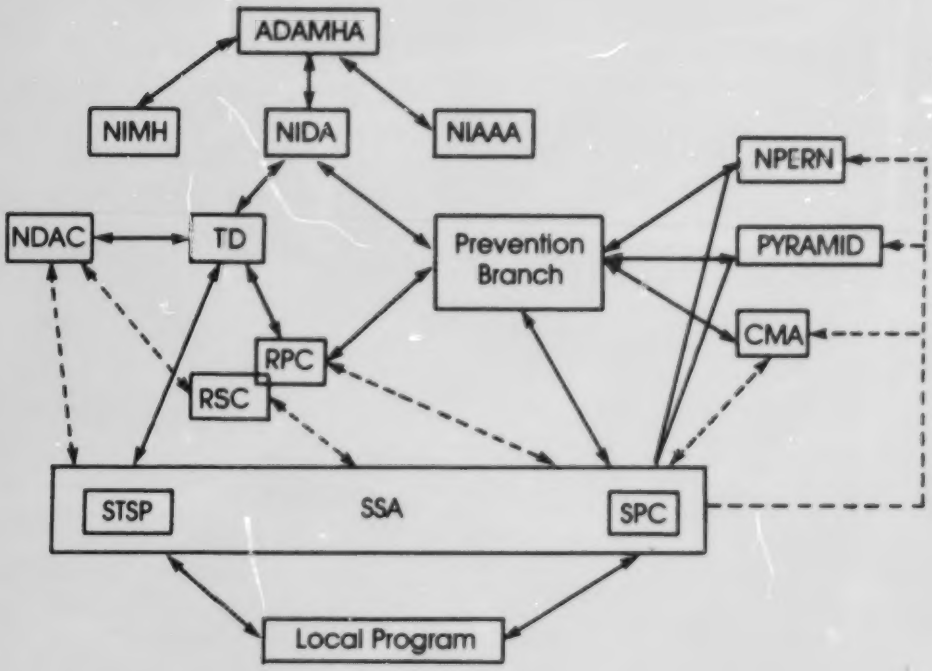
- Describe at least two goals and two objectives that they have for the course
- Describe at least four different approaches to prevention.

MATERIALS

- Name Tags
- Magic Markers
- Newsprint
- Tape
- Participant List
- Registration Forms
- Participant Manuals
- Pretest
- Figures
- Reference Sheets
- Worksheet

MODULE I	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. REGISTRATION	30 MINUTES	INDIVIDUAL
2. PRETEST	30 MINUTES	INDIVIDUAL
3. NAME CHAIN	15 MINUTES	LARGE-GROUP EXERCISE
4. INTRODUCTION	20 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
5. SHARING SUCCESSES, NEEDS, AND EXPECTATIONS	45 MINUTES	INDIVIDUAL EXERCISE AND LARGE-GROUP DISCUSSION
6. COURSE OVERVIEW	20 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
7. SUMMARY	10 MINUTES	LARGE-GROUP LECTURE

Scheme of the Division of Training and Prevention Branch Programs



NOTE: NIAAA funding structures vary from state to state. In some states, NIAAA programs are funded through a separate system, similar to the one depicted here. In others, NIAAA and NIDA programs are both funded through the single system shown here.

MODULE 1: ORIENTATION, OVERVIEW, AND CLIMATE SETTING-1 WORKSHEET

SUCCESSES, NEEDS, EXPECTATIONS

	SUCCESSES	PROGRAM NEEDS	PERSONAL EXPECTATIONS OF TRAINING
1.			
2.			
3.			

A BASIC PREVENTION LIBRARY

Resource Publications

Ardell, Donald B. High Level Wellness: An Alternative To Doctors, Drugs and Disease. Emmaus, PA.: Rodale Press, 1977.

Center for Human Services. Prevention Needs Assessment Workbook. Rockville, MD.: National Institute on Drug Abuse, Prevention Branch, 1979.

Center for Human Services. Prevention Planning Workbook. Rockville, MD.: National Institute on Drug Abuse, Prevention Branch, 1978.

Center for Multicultural Awareness. Administered by Development Associates, Inc. Multicultural Drug Abuse Prevention (Booklet 1). Rockville, MD.: National Institute on Drug Abuse, 1979.

Center for Multicultural Awareness. Administered by Development Associates, Inc. Needs Assessment (Booklet 2). Rockville, MD.: National Institute on Drug Abuse, 1979.

Center for Multicultural Awareness. Administered by Development Associates, Inc. Multicultural Strategies (Booklet 3). Rockville, MD.: National Institute on Drug Abuse, 1979.

Center for Multicultural Awareness. Administered by Development Associates, Inc. Funding Strategies (Booklet 5). Rockville, MD.: National Institute on Drug Abuse, 1979.

Center for Multicultural Awareness. Administered by Development Associates, Inc. Building in Evaluation (Booklet 6). Rockville, MD.: National Institute on Drug Abuse, 1979.

National Center for Alcohol Education. Decisions and Drinking: An Ounce of Prevention. (DHEW Publication No. ADM-77-454). Rockville, MD.: National Institute on Alcohol Abuse and Alcoholism, 1977.

National Center for Alcohol Education. Decisions and Drinking: The Power of Positive Parenting. (DHEW Publication No. ADM-77-453). Rockville, MD.: National Institute on Alcohol Abuse and Alcoholism, 1977.

National Center for Alcohol Education. Decisions and Drinking: Reflections in a Glass. (DHEW Publication No. ADM-77-452). Rockville, MD.: National Institute on Alcohol Abuse and Alcoholism, 1977.

National Clearinghouse for Alcohol Information. Alcoholism Prevention: Guide To Resources and References (DHEW Publication No. ADM-79-886) and References. Rockville, MD.: National Institute on Alcohol Abuse and Alcoholism, 1979.

National Institute on Drug Abuse, Prevention Branch. Primary Prevention in Drug Abuse. (DHEW Publication No. ADM-76350). Washington, D.C.: U.S. Government Printing Office, 1977.

National Institute on Drug Abuse Research Monograph Series. Rockville, MD.: National Institute on Drug Abuse.

National Prevention Evaluation Resource Network. Prevention Evaluation Guidelines. In publication: Rockville, MD.: National Institute on Drug Abuse, 1979.

Public Health Service, Office of the Assistant Secretary for Health and Surgeon General. Healthy People: The Surgeon General's Report on Health Promotion and Disease Prevention. (DHEW Publication No. 7955071). Washington, D.C.: U.S. Government Printing Office, 1979.

Pacific Institute for Research and Evaluation: Pyramid Project. Balancing Head and Heart: Sensible Ideas for the Prevention of Drug and Alcohol Abuse. Lafayette, CA.: Prevention Materials Press, 1975.

Pacific Institute for Research and Evaluation: Pyramid Project. Teaching Tools For Primary Prevention: A Guide To Classroom Curricula. Lafayette, CA.: Prevention Materials Press, 1979.

Resnik, Henry S. It Starts with People: Experiences in Drug Abuse Prevention. (DHEW Publication No. ADM-79-590). Rockville, MD.: National Institute on Drug Abuse, 1978.

Audiovisual Resources

National Institute of Mental Health, Drug Abuse Film Collection. The Social Seminar Series. Washington, D.C.: National Audiovisual Center (GSA), 1971.

Local Resources

State plan--available from the State Prevention Coordinator in the Single State Agency

State Media Directory--available from the telephone company business office

Local directory of community agencies--available through United Way

Statewide substance abuse program directory--available through the Single State Agency

Technical Assistance Sources

PYRAMID Project (West) 3746 MH, Diablo Blvd., Suite 200, Layfayette, CA. 415-284-5300

PYRAMID Project (East) 7101 Wisconsin Avenue, Suite 1006, Bethesda, MD. 301-654-1194

Center for Multicultural Awareness, 2924 Columbia Pike, Arlington, VA. 22204
703-979-0100

National Drug Abuse Center, 5530 Wisconsin Avenue, Chevy Chase, MD. 20015
301-654-3582

Regional Support Centers

Single State Agencies

Professional Associations

National Association of Prevention Professionals, 176 W. Adams Street, Chicago, IL, 312-782-3479

National Association of State Alcohol and Drug Abuse Directors, 1612 K Street, NW, Washington, D.C., 202-659-7632

NOTE: For information on minority coalitions/associations, contact the Center for Multicultural Awareness

Newsletters

Training the Human Resources--published by the National Institute on Drug Abuse, Manpower and Training Branch, Rockville, MD. 20857

The Prevention Resource Bulletin--published by PYRAMID, Lafayette, CA., under contract to the National Institute on Drug Abuse, Prevention Branch.

PREVENTION PROGRAM MANAGEMENT

PRETEST

General Instructions

Consider the following questions a "preview" of the training you are about to begin. They will include terms and concepts that may be unfamiliar to you now. This test is meant to measure your current knowledge of the material that will be presented in this course. Thus, if you do not know the answer to a question, go on to the next. Do not linger over questions or guess at the answers.

I. TRUE and FALSE

The following statements are related to aspects of Prevention Program Management. Please circle either "True or False" on the answer sheet. REMEMBER: this will not be graded, so please do not guess; skip the item and go on to the next.

1. Information-giving approaches have been previously shown to result in an increase rather than decrease in drug use.

2. A survey conducted in 1974 by Dr. Robert DuPont concluded that the prevention efforts as they exist in drug education programs in schools have been effective.

3. Program management theory suggests that effective managers should not need to spend more than one-third of their time on planning and evaluation.

4. Since funding sources are generally interested in the least expensive method to get a job done, alternative approaches should be considered and the choices justified.

5. Trainers must attend to differences which may reflect differing values or norms of various cultures represented within the training population; however, urban-rural distinctions need not be addressed.

6. Primary prevention is a constructive process designed to intervene in patterns of drug use and experimentation.

7. In following action planning procedures, one would use the Sherwood Model, which assists in program planning.

8. Staff burnout in the human services field occurs in less severe forms because its onset is recognized sooner and experienced, effective prevention workers are readily available to deal with the problem.

9. The Program Development Logic Model, as developed by V. C. League and Karen Trisko, outlined one of their planning tools as "De-mystifying the Planning."

10. Even after the time drugs become an integral part of one's lifestyle, he/she should still be considered for a prevention program.

11. In general, burnout emanates from the individual's inability to cope when under pressure to meet daily demands.

12. A good proposal for funding would concentrate on a problem statement for examining the problem.

13. An essential skill that an effective manager should possess is the ability to anticipate his or her staff's readiness to complete a task.

II. MULTIPLE CHOICE

Choose the correct answer(s) to the following questions and circle the appropriate letter(s) on the answer sheet. More than one answer may be selected to complete the question.

14. All of the examples below are types of networks except:

    a. Person-Family
    b. Organizational
    c. Letter
    d. Human Service

15. Networks are intended to be:

    a. Process-oriented, member-supportive, decentralized learning systems
    b. Task-oriented, competitive, decentralized learning systems
    c. Centralized learning systems, process-oriented, mind-building
    d. None of the above

16. Which of the following statements is an assumption?

    a. Alcohol is the predominant drug chosen by rural populations.
    b. Low income people drink because they have no options, either social or economic.
    c. Thirty percent of the people living in the lower East side of New York City are Hispanic.
    d. All of the above.

17. Obstacles to collaboration are:

    a. Individual
    b. Situational
    c. Cannot be moved, avoided, or negated
    d. Susceptible to external action

18. When preparing to address or actually addressing a local funding source, you should:

    a. Use your board of directors to help you gain support for your programs or to prepare for your presentation.
    b. Read local newspapers and attend public meetings to learn appropriate procedures and protocol.
    c. Make your programs "saleable" and "understandable" to the public.
    d. All of the above.

19. Select the three sets of behaviors identified in the Managerial Behavior model below:

    a. Transferring Behavior, Shaping Behavior, Climate-Setting Behavior
    b. Climate-Setting Behavior, Structuring Behavior, Transferring Behavior
    c. Structuring Behavior, Climate-Setting Behavior, Mind-Setting Behavior
    d. Structuring Behavior, Transferring Behavior, Learning Behavior

20. All of the items listed below are effective approaches for evaluating a mass media campaign of a prevention program, EXCEPT:

    a. A control group composed of a random sample from a similiar community nearby.
    b. A narrow-target-audience sample not yet exposed to the media presentation.

c. The pre- and post-test control group design.
d. A mail survey to a random sample of households drawn from the phone book in target areas.

21. Complete the following statement.

When planning a program evaluation, the...

a. Program staff should help to develop objectives and criteria.
b. Program staff participation in evaluation planning violates the objectivity of the evaluation.
c. Evaluation data collection should be built into ordinary procedures of the program.
d. Evaluation data should be collected using special procedures.

22. In measuring program objectives:

a. One should use a single measure for each objective.
b. Multiple measures for objectives should be used whenever possible.
c. Measurements of impact should be scheduled only at the beginning and end of the program.
d. Measurement should be scheduled according to the time during which you expect program effects to emerge.

III. MATCHING

Match the appropriate item to the statements provided. More than one answer may be selected.

A. Match each of the terms below with the following examples that best fit each term:

a. Objectives
b. Criteria
c. Measures

23. Increase the amount of interpersonal contact among the socially isolated elderly in three apartment complexes

24. Fifty percent of the persons over 65 living in three apartment complexes

25. Cost of serving the elderly

26. Identify all Hispanic elderly in need of health care

B. Match the correct type of evaluation to the following statements below:

a. Impact
b. Process
c. Outcome

27. Information on client change

28. Information on program organization, operation, and management

29. Frequently need to satisfy accountability purposes

30. Eliminates alternative explanations of results by experimental control

31. Can supply diagnostic and interpretive data about a program

PRETEST

Answer Sheet

Circle the correct response(s)

I. TRUE AND FALSE

1. True False
2. True False
3. True False
4. True False
5. True False
6. True False
7. True False
8. True False
9. True False
10. True False
11. True False
12. True False
13. True False

II. MULTIPLE CHOICE

14. a b c d
15. a b c d
16. a b c d
17. a b c d
18. a b c d
19. a b c d
20. a b c d
21. a b c d
22 a b c d

III. MATCHING

23. a b c d
24. a b c d
25. a b c d
26. a b c d
27. a b c d
28. a b c d
29. a b c d
30. a b c d
31. a b c d

MODULE II

MODULE II. PREVENTION: YESTERDAY, TODAY, AND TOMORROW **TIME:** 3 HOURS 30 MINUTES

GOALS

- To expose participants to critical issues and common problems that affect the survival and growth of prevention programs, while building upon their individual experiences with their own programs
- To share successful growth strategies and discuss new options

OBJECTIVES

At the end of this Module, participants will be able to:

- List five critical incidents in the development of their drug abuse prevention programs
- Identify at least three "survival issues" common to each of the drug-abuse prevention programs that are represented
- Describe at least one successful "coping strategy" for each critical issue
- Identify at least one resource person within the training population who has dealt successfully with a similar survival issue.

MATERIALS

- Newsprint
- Magic Markers
- Reference Sheets
- Figures
- Worksheet

MODULE II OVERVIEW

EXERCISE	TIME	METHODOLOGY
1. THE HISTORY OF DRUG ABUSE PREVENTION	1 HOUR	LARGE-GROUP LECTURE/DISCUSSION
2. DRUG ABUSE PREVENTION DEFINITION: OPTION #1	10 MINUTES	INDIVIDUAL AND LARGE-GROUP LECTURE/DISCUSSION
3. DEFINING DRUG ABUSE PREVENTION: OPTION #2	30 MINUTES	INDIVIDUAL/SMALL-GROUP DISCUSSION
4. GROWTH OF DRUG ABUSE	45 MINUTES	LARGE-GROUP LECTURE
5. PROGRAM LIFELINES	1 HOUR	INDIVIDUAL AND DYAD EXERCISE
6. REPORT OUT	30 MINUTES	LARGE-GROUP DISCUSSION
7. OVERVIEW OF THE GROWTH AND HISTORY OF DRUG ABUSE PREVENTION	1 HOUR	LARGE-GROUP LECTURE/DISCUSSION
8. PREVENTION TODAY	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
9. ORGANIZATIONAL/ PROGRAM INTERVIEW	30 MINUTES	DYAD-GROUP EXERCISE
10. REPORT OUT	30 MINUTES	LARGE-GROUP DISCUSSION

AN OPERATIONAL DEFINITION OF DRUG ABUSE PREVENTION

- as conceptualized by
the National Institute on Drug Abuse's Prevention Branch

The fundamental objective of drug abuse prevention is to assist youth to develop and mature into healthy productive members of our society. Toward that end, prevention involves the process of "enablement," in which prevention professionals, lay-persons, family members and friends who are concerned, help youth create positive attitudes, values, behaviors, skills and lifestyles that will enable them to mature into happy and competent citizens who need not resort to the use of drugs. The desired outcome of prevention programs is the reduction, delay, or prevention of drug use behavior that is not within the parameters of medical therapy and that disrupts the normal developmental life cycle leading to human competency.

Over the last five years, the concept of drug education has expanded beyond programs that provide youths information or advice concerning drugs and their use. The current conceptual framework for drug abuse prevention programming at NIDA has evolved from the many prevention programs currently operating at the State and the community level. This framework for prevention operationally defines drug abuse prevention along a continuum of health care programs. The four prevention modalities are information, education, alternatives and intervention programs, with each program type best serving youth at different stages of the drug abuse problem. Treatment and rehabilitation programs complete the continuum and focus upon the drug addict and the recovering drug abuser./1/

Prevention Modalities are defined as follows:

> Information Modalities--Approaches that involve the production and/or distribution of accurate and objective information about all types of drugs and the effects of those drugs on the human systems. Examples include drug information seminars, pamphlet development and distribution.
>
> Education Modalities--Approaches that focus on skill building through use of well-defined and structured affective learning processes. Examples of skills that are to be enhanced include values clarification and awareness, problem solving, decisionmaking, coping with stress, and inter-personal communication. The affective learning processes that are used focus on helping people who may be deficient in the above mentioned skills, but may also serve to reinforce already existing skills. Examples include role playing, peer facilitation, and cross-age tutoring.

/1/ Bukoski, Dr. William J., "Drug Abuse Prevention: A Meta-evaluation Process," paper presented at the American Public Health Association Conference, November 4-6, 1979.

Alternatives Modalities--Approaches that provide growth-inducing experiences through which individuals develop increased levels of confidence and self-reliance. Enhancement in these areas is provided through social, occupational, esthetic, affective, and cognitive experiences. Alternatives-based activities are designed to provide exposure to a variety of rewarding activities that offer positive alternatives to drug-taking behavior. Examples include human service delivery in the community, restoration, conservation, and preservation of the environment.

Intervention Modalities--Approaches that focus on the reduction, elimination, and/or delay of drug use, drug use-related dysfunctional behavior, and other problem behaviors prior to onset of serious, chronic, debilitative behaviors. These prevention approaches are able to provide assistance and support to people during critical periods in their lives, when person-to-person communication, sharing of experiences, and empathic listening could contribute to a successful adjustment of a personal or family problem. Examples include professional counseling, rap sessions, and peer counseling.

Prevention settings are defined as follows:

School settings are those in which the major percentage of activity takes place within a school system, and where there are direct linkages to, and invoivement with, school officials and functions, often during normal school hours.

Occupational settings are those in which the activities take place in an organization that has legal status as a profit or non-profit making corporation, partnership, or other formally-defined income-generating entity.

Family settings are those in which the major focus is on strengthening family relationships. The family is seen as the group through which the desired outcomes should be addressed.

Community settings are those in which the majority of activities are provided under community auspices, and are concerned with activities which impact on both individuals and the community as a whole. /2/

/2/ NIDA, Prevention Branch, "State Prevention Coordinator Grant Program **Guide**lines," May 1980.

DEFINITIONS OF PRIMARY PREVENTION

1. "Primary drug abuse prevention is a constructive process designed to promote personal and social growth of the individual toward full human potential and thereby inhibit or reduce physical, mental, emotional or social impairment which results in or from abuse of chemical substances."

   --the NIDA Drug Abuse Prevention Delphi, 1975.

2. "The purpose of prevention is to increase the likelihood that individuals will develop drinking-related behaviors that are personally and socially constructive. Negatively stated, prevention programs are aimed at reducing the number of persons whose alcohol-related behavior adversely affects the way they carry on the roles and responsibilities of everyday living."

   --from Planning Prevention Programs, National Center for Alcohol Education

3. "Primary prevention of drug abuse is a constructive process designed to promote personal, social, economic and political growth of the individual toward full human potential; and, thereby, inhibit or reduce personal, social, economic or political impairment which results in or from the abuse of chemical substances."

   --the Center for Multicultural Awareness, a project of NIDA's Prevention Branch

4. "Primary prevention encompasses those activities directed at specifically identified vulnerable high-risk groups within the community who have not been labelled as psychiatrically ill and for whom measures can be undertaken to avoid the onset of emotional disturbance and/or to enhance their level of positive mental health. Programs for the promotion of mental health are primarily educational rather than clinical in conception and operation with their ultimate goal being to increase people's capacities for dealing with crises and for taking steps to improve their own lives."

   --Stephen E. Goldston, Ed.D., Coordinator for Primary Prevention Programs, National Institute for Mental Health

5. "The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) requires the description of two types of behaviors - behavioral antecedents and consequences - which are useful in designing primary prevention activities, particularly with regard to health promotion and disease prevention.

   - Prevention of behavioral antecedents refers to interventions to reduce high risk behaviors such as teenage drinking, smoking and experimental drug use, which increase the probability of developing physical, emotional and behavioral problems.

- Prevention of behavioral consequences refers to interventions to prevent the deleterious effects (consequences) of high-risk behavior, such as accidents resulting from drinking which driving, or suicides or homicides resulting from emotional disorders, excessive drinking, or substance abuse."

--ADAMHA Prevention Policy Paper, August 17, 1979

6. "An aggregate of community education and social action programs which within an identified length of time and for specified groups of people, are able to measureably reduce the likelihood, frequency, seriousness, or duration of chemical use problems by means other than referral or recourse to the chemical dependency treatment system or correctional services."

--(The content of this definition was developed by the Michigan Office of Substance Abuse Services prevention staff.)

7. Primary prevention of social and behavioral problems is accomplished through ongoing processes that provide opportunities for individuals, small groups and organizations to increase: 1) knowledge or awareness of personal and collective potentials; 2) skills necessary to attain those potentials; and 3) creative use of resources to the end that all people have the ability to effectively cope with typical life problems and recognize, reduce or eliminate unnecessary or debilitating stress in the community without abusing themselves or others and prior to the onset of incapacitating individual, group or organizational problems.

--(The content of this definition was developed by the Human Services Training Institute, Michael B. Winer, Association Director, Spokane, Washington.)

8. Prevention includes purposeful activities designed to promote personal (emotional, intellectual, physical, spiritual, and social) growth of individuals and strengthen the aspects of the community environment which are supportive to them in order to preclude, forestall, or impede the development of alcohol and other drug abuse problems.

--Wisconsin State Drug Abuse Plan

9. Another way to break down the concept of health promotion is to consider the community as well as the individual. We are accustomed to think of an individual's health, both in terms of treatment and building resistance, but we can extend this to the community. Often people succumb to ill health in part as a result of forces in the social context. Such could include unemployment, insensitive institutions, including schools, or prevalent attitudes which reinforce unhealthy behaviors. If this is the case, then it makes sense to design programs which deal with these factors.

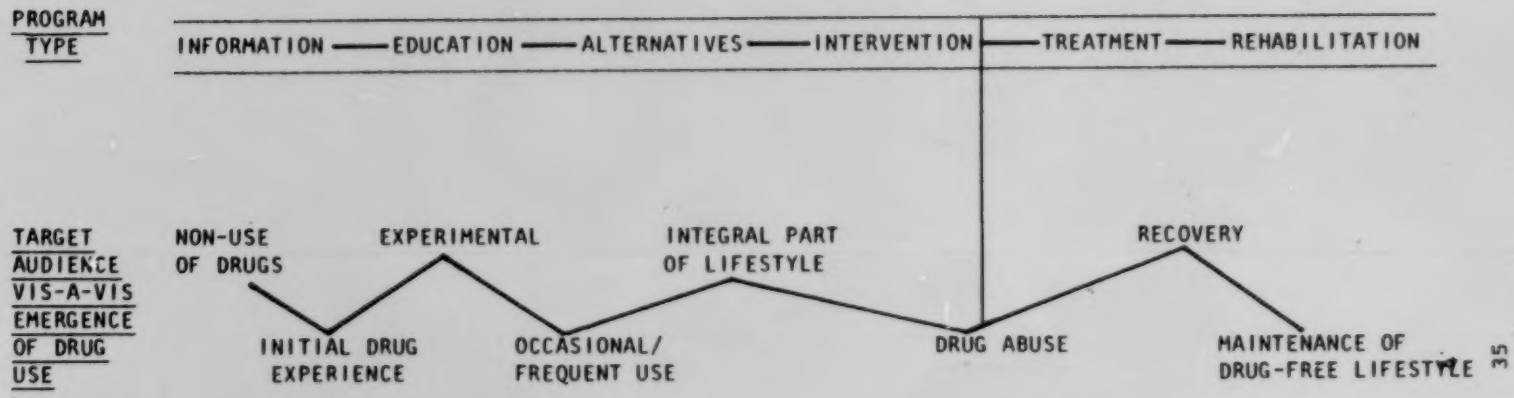
--Vermont Alcohol and Drug Abuse Division

10. The National Association of Prevention Professionals' defines prevention as a proactive process utilizing an interdisciplinary approach designed to empower people with the resources to constructively confront stressful life conditions.

CRITICAL INCIDENTS IN THE GROWTH OF DRUG ABUSE PREVENTION

- Scare Tactics
- "Drug-specific" information and education programs
- Moratorium on prevention activities
- The Delphi
- Programs to develop and reinforce positive behavior
  - community-based alternatives
  - integrated cognitive and affective education approaches
- Critical historical incident

DRUG ABUSE PROGRAM CONTINUUM



PREVENTION PROGRAMS

INFORMATION

- Accurate information
  - -Legal and illegal drugs and their effects
- Target specific for maximum results

ALTERNATIVES

- Constructive activities that meet developmental needs of youth
- Ownership and self-investment
- Constructive peer pressure

EDUCATION

- Process to help individuals develop skills to help themselves
  - -Decisionmaking skills
  - -Values awareness
  - -Communications
  - -Self-understanding
  - -Parent-family involvement
  - -Curricula
  - -Counseling

INTERVENTION

- Specific assistance and support for youth usually at high risk
  - -Counseling
  - -Hot lines
  - -Cross-age tutoring
  - -New peer group creation

DEFINING PREVENTION

1. Prevention is _____

_____

2. Prevention programs are _____

_____

3. Prevention is different from "intervention" because _____

_____

_____

4. Drug abuse prevention is different from drug education because _____

_____

_____

5. The age range for whom a prevention program is likely to be most successful is

_____

6. An example of a "drug abuse prevention activity" that isn't called drug abuse prevention _____

_____

7. Indicators that a prevention program is working might be _____

_____

_____

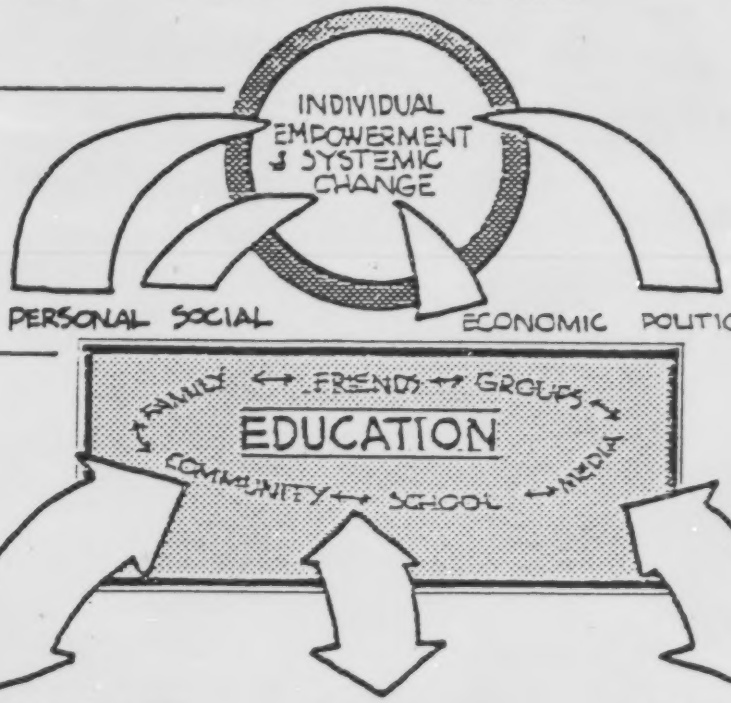
8. Based on the above, my definition of drug abuse prevention is _____

_____

_____

MODULE 11: PREVENTION, YESTERDAY, TODAY, AND TOMORROW -3 **FIGURE**

MULTICULTURAL DRUG ABUSE PREVENTION--AN IMPLEMENTATION DESIGN



CONTENT CATEGORIES	KNOWLEDGE	SKILLS	RESPECT
	PERSONAL SOCIAL ECONOMIC POLITICAL	COMPUTATION COMMUNICATION VALUING DECISION-MAKING SELF-DEVELOPMENT ANALYTICAL MANIPULATION	SELF OTHERS
KEY CONCEPT	DIFFERENCES	DIFFERENCES	DIFFERENCES
MAJORITY DRUG ABUSE PREVENTION APPROACHES	DRUG INFORMATION ALTERNATIVES INTERVENTION	ALTERNATIVES INTERVENTION	ALTERNATIVES INTERVENTION

MODULE III

MODULE III: PROGRAM MANAGEMENT THEORY AND PRACTICE **TIME:** 4 HOURS 15 MINUTES

GOALS

- To relate the growth issues being experienced by drug abuse prevention programs to the body of knowledge concerning organizational development and human services management

OBJECTIVES

At the end of this Module, participants will be able to:

- Help participants identify the present stage or organizational development of their prevention program in terms of current theory and practice
- Describe the basic functions of management as applied to human service programs.

MATERIALS

- Paper
- Pencils
- Newsprint
- Magic Markers
- Participant Manuals
- Worksheet
- Figures
- Selected Reading

MODULE III	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. UNDERSTANDING THE CONTEXT OF YOUTH PREVENTION PROGRAMS	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
2. TEN DOMAINS FOR UNDERSTANDING ORGANIZATIONS	30 MINUTES	INDIVIDUAL/SMALL GROUP/LARGE GROUP EXERCISE/DISCUSSION
3. THE NATURE OF MANAGEMENT	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
4. MANAGEMENT--WHAT IT IS	20 MINUTES	LARGE-GROUP AND SMALL-GROUP LECTURE/DISCUSSION
5. MANAGEMENT FUNCTIONS	20 MINUTES	LARGE-GROUP AND SMALL-GROUP LECTURE/DISCUSSION
6. REPORT OUT	10 MINUTES	LARGE-GROUP DISCUSSION
7. A SITUATIONAL APPROACH TO MANAGEMENT	30 MINUTES	LARGE-GROUP LECTURE
8. STYLES OF LEADERSHIP	50 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
9. ASSESSING THE READINESS LEVEL	20 MINUTES	LARGE-GROUP DISCUSSION
10. SUMMARY	15 MINUTES	LARGE-GROUP DISCUSSION

TEN DOMAINS FOR UNDERSTANDING ORGANIZATIONS
(Adapted from Leroy Wells' article,
Ten Domains for Understanding Organizations)

Instructions: Analyze your program in terms of the ten organizational domains listed below. Insert data specific to your program in the boxes to the right of the domains.

	PROGRAM DATA
1. Origins and history	
2. Major tasks	
3. Social structure	
4. Boundary management	
5. Culture	
6. Social process	
7. Technology	
8. How an enterprise generates, allocates and utilizes resources	
9. Effectiveness and efficiency (output)	
10. Demographic characteristics	

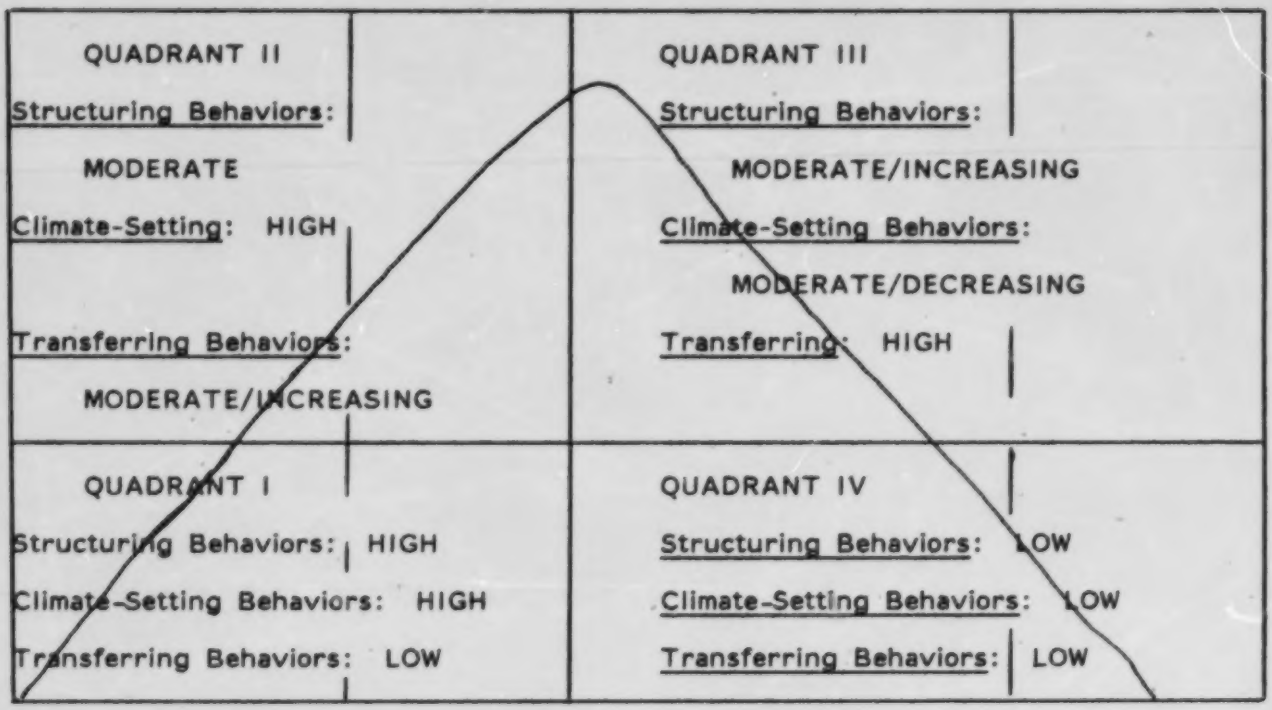
MANAGEMENT FUNCTIONS

FUNCTION	ACTIVITY	DEFINITION
1. PLAN (Predetermine course of action)	Forecast	Establish where present course will lead.
	Set objectives	Determine desired end results.
	Develop strategies	Decide how and when to achieve goals.
	Program	Establish priority, sequence timing of steps.
	Budget	Allocate resources.
	Set procedures	Standardize methods.
	Develop policies	Make standing decisions on important recurring matters.
2. ORGANIZE (Arrange and relate work for effective accomplishment of objectives)	Establish organization	Draw up organization chart.
	Delineate relationships	Draw liaison lines to facilitate coordination.
	Create position descriptions	Define scope, relationships, responsibilities, and authority
	Establish position qualifications	Define the qualifications for persons in each position.
3. STAFF (Choose competent people for positions in organization)	Select	Recruit qualified people for each position.
	Orient	Familiarize new people with situation.
	Train	Make proficient by instruction and practice.
	Develop	Help improve knowledge, attitudes, and skills.

Figure III-1 Continued

4.	DIRECT (Bring about purposeful action toward desired objectives)	Delegate	Assign responsibility and exact accountability for results.
		Motivate	Persuade and inspire people to take desired action.
		Coordinate	Relate efforts in most effective combination.
		Manage differences	Encourage independent thought and resolve conflict.
		Manage change	Stimulate creativity and innovation in achieving goals.
5.	EVALUATE (Ensure progress toward objectives according to plan)	Establish reporting	Determine what critical data are needed, how and when.
		Develop performance standards	Set conditions that will exist when key duties are well done.
		Measure results	Ascertain extent of deviation from goals and standards.
		Take corrective action	Adjust plans, counsel to attain standards, replan and repeat cycle.
		Reward	Praise, remunerate, and discipline.

MATCHING MANAGERIAL STYLE TO GROUP READINESS LEVEL



LOW READINESS LEVEL | AVERAGE READINESS LEVEL | HIGH READINESS LEVEL

TEN DOMAINS FOR UNDERSTANDING ORGANIZATIONS

By

Leroy Wells, Jr.

Yale University
School of Administrative Management

This unpublished article is reprinted, with permission of the author, from Yale University, School of Administrative Science.

TEN DOMAINS FOR UNDERSTANDING ORGANIZATIONS

Leroy Wells, Jr.
Yale University School of Administrative Science

INTRODUCTION

This paper will describe ten domains that are useful in understanding organizations and institutions. The use of these domains allow for a more comprehensive approach for understanding organizations. An attempt will be made to synthesize aspects of a psychoanalytic, social, psychological, psychodynamic and sociological theories of organizations. The ten domains discussed are the following:

1) Origins and History
2) Major Task(s)
3) Social Structure
4) Boundary Management
5) Culture
6) Social Process
7) Technology
8) How an Enterprise generates, allocates and utilizes resources
9) Effectiveness and Efficiency (output)
10) Demographic Characteristics

AIMS

The primary purpose, as noted above, is to develop a more comprehensive approach for the understanding of organizations. The ten domains, stated above, refer to complex, interrelated perspectives or vantage points from which organizations can be examined.

The approach taken here is a synthesis and expansion on the following theories of organizational and human behavior.

1) The sociopsychological constructs for understanding organizations and groups as discussed by Newton & Levinson (1973); Inkeles & Levinson (1963).

2) The open systems theories of organization and human behavior (Barker, 1973; Miller, J.G., 1965; Rice and Miller, 1967; Katz and Kahn, 1966; Rice, 1958, 1963; Trist and Emery, 1965; von Bertalanffy, 1968).

3) The psychoanalytic works of Turguet, 1973; Bion, 1961; Slater, 1966; Levinson, 1972; Freud, 1949; Menzies, 1960; Rioch, 1970; Klein, M., 1959.

4) The social psychological principle of organization and behavior as discussed by Argyris, 1964; Schein & Bennis, 1965; Branford, Benne, & Gibb, 1966.

5) The literature by (Kovel, 1970; Malcom X, 1965; Allport, 1958; Fanon, 1967; Hernton, 1965, 1971) on the issues of racism, prejudice, oppression and sexism, provides pertinent data to examine how the demography of an organization can influence its dynamics and behavior.

These areas are complex interrelated perspectives or vantage points and are essentially heuristic; they are not yet adequately conceptualized and the boundaries between and among them are ambiguous at many points. However, they have some utility in providing a more systematic view of organizational dynamics and phenomena that must ultimately be taken into account, for a comprehensive understanding of organizations.

DIAGNOSTIC DOMAINS

The order in which the domains are described below, are not indicative of their relative importance. However, at times, contingent on the dynamics of an organization, various domains will emerge to the foreground of the organization's structure and processes.

1) History and Origins of the Enterprise:

The history and origins of an enterprise is important information for the diagnostician. H. Levinson (1972), suggests that the diagnostician must discover the background of the institution, changes in leadership, key development phases, major crises of the institution, age, type of institution, size, affiliations, and product-history, i.e., changes in the organization's goals, technologies, services, employee and clients. Another aspect of information concerning history of the organization is the dynamics surrounding its conception, i.e., the founder. How it was formed? How did the social structure develop? Was the formation planned? These questions asked, what was the condition of milieu at the time the organization was conceived. The history-taking process is analogous to the process that a psychoanalytic-oriented psychotherapist might ask his/her client.

H. Levinson states, "The consultant in organizational life provides a vantage point from which aspects of the enterprise behavior can be understood. In sum, the organization is a product of its experience, i.e., history.

2) Task(s) of the Organization:

"A task is the end toward which work is aimed (Miller and Rice, 1967). Organizations and groups have multiple major tasks to perform, however, the organizations must perform a primary task--the task it must perform to survive." Other tasks, are given lower priority and resources. At times the lower priority task supports the primary task--for example, the recruitment of medical doctors in hospitals. Newton and Levinson write that the definition of the primary task has important consequences f · a group or organization. The definition of primary task provides the basis for decision about the mode of work and technology that will be employed. Definition of primary task may also form the basis for the creation of social

structure and social processes. Selznick (1956) suggests, "an appropriately defined primary task offers stability and direction to an enterprise protecting if from adventurism or costly drifting." Definition of primary task also generates conflict, if the vision of a primary task is located in top management, it will be subject to distortion, fluctuation, and confusion. Simply stated differently, if members of an organization are not clear on what they are supposed to do and how to do ambiguity and unclarity regarding primary task has major consequences for the system. It provides the setting for competing, incompatible goals and non-task behavior to emerge.

At times a group or its leadership may allow and foster ambiguity and confusion regarding the primary task and act in non-productive ways in order to defend against anxiety, conflict, and perhaps pain that is related to the primary task. /1/

How an organization defines its primary task and the mode in which it is carried out, often provides the central dilemma(s) for the organization.

The definition of primary task provides an essential criterion for the evaluation of the organization's performance and effectiveness. Therefore, ambiguity surrounding the primary task and task priority has consequences for the evaluation of the organization's export product.

An analysis of task(s) of the enterprise provides potent insight into the phenomena of the organization.

Social structure provides the vehicle to carry out the primary task of the enterprise. Unclear and ambiguous sturcture jeopardizes the enterprise.

An analysis of social structure, (i.e., division of labor, division of authority, and the accountability structure) is a central aspect of understanding organizational life.

3) Social Structure of the Enterprise:

The social structure of an enterprise provides the framework of the organization. It sets the forms and patterns and various devices for integrating and coordinating the organizations activities. Two essential aspects of social structure are the division of labor and the division of authority. The division of labor, is the way in which the work of the enterprise is distributed among its parts. Within the division of labor, organizational positions are created. Positions refer to social structure, and are more or less permanent, they are subject to change when the organizational structure changes. Roles are another aspect of social structure, and refer to the function of the positions in the social system. Levinson, (1959) emphasized the distinction between role and position and suggests that if one loses the idea of position and thinks only in terms of role, one tends to over-emphasize process, activity, function, and obscure structural properties from which organizational life emerges.

Division of labor also refers to the differentiation of the organization to accomplish its task. With differentiation of an enterprise into sub-system(s), the need for integration of the various sectors activities are necessary. If

integration of the enterprise is required, then managers are given responsibility of integrating the activities, authority is required, i.e., the legitimate right to make demands, exert influence and give directions, and to apply sanctions. In order to achieve integration of the enterprise, stratification occurs, that is hierarchical arrangement of the positions. This hierarchy, i.e., a division of authority is another central aspect of social structure.

The division of authority relates here to the patterning of subordination within the organization and its sub-system(s). Within the structure, authority is invested in positions and not in individuals. If a position has the responsibility to coordinate and supervise subordinates, it then must have authority to accomplish this task. Often a position carries more responsibility than authority.

The way in which the individual uses the authority invested in him/her, provides important information about the nature of the social structure and is related to the culture of the organization.

The structural characteristic of an organization has consequences: 1) for its management; 2) how members see, understand, and relate to their work. Ambiguity regarding authority and subordination provides the setting for frustration and confusion. When individuals are not clear about accountability and responsibility, they are likely to indulge in non-task behavior. When the structure is incompatible with the primary task of the enterprise, the system is in for trouble.

Social structure provides the vehicle to carry out the primary task of the enterprise. Unclear and ambiguous structure jeopardizes the enterprise.

An analysis of social structure, (i.e., division of labor, division of authority, and the accountability structure) is a central aspect of understanding organizational life.

4) Management of Boundaries, Internal and External:

The division of labor defines boundaries, and the division of authority locates responsibility for regulating and controlling them. The concept of boundaries is crucial from an open system perspective, E.J. Miller and A.K. Rice (1967) suggest boundaries should be considered a region rather than a line. Boundaries serve two major functions for an open system. First, it has a separating function: it acts as the demarcation between the organization and what is external to it; and serves to define the various internal operations of the system. Second, boundaries have a transactional function that exists to enable useful exchange between system and environment. From an open system perspective, survival is contingent on continuous exchange with the environment. The interaction of the enterprise can be thought of in terms of permeability of the organization's boundaries. The degree of and kind of permeability will affect the adaptation of the organization to its environment. Too porous a boundary invites a chaos and disorganization, whereas rigid boundaries become barriers causing death through entropy.

Miller and Rice (1967) state: "management of an enterprise requires three kinds of boundary control:"

1) Regulation of task system boundaries (i.e., regulation of the whole enterprise as an import-conversion-export system and regulation of constituent system of activity).

2) Regulation of sentient system boundaries (the boundaries of the groups to which individuals belong either directly through their role in system of activity or indirectly through their consequential role-sets and personal relationships).

3) Regulation of relations between task and sentient systems. In general, management of boundaries is crucial in leadership for an enterprise. Without adequate boundary definitions of task and sentient groups, organizational boundaries are difficult to define. If a boundary is not located adequately, individuals will draw it at various places and it will lead to confusion inside and outside. In the individual, this leads to mental breakdown, in an enterprise, to inefficiency and failure.

As stated above, the boundaries of an organization are the area in which organizational, environment transactions occur. Boundary structures refer to the procedures, rules, personnel, organizational sub-units, etc., which carry out the modification or transformations which occur in environment-organization exchanged (Berrier, F., 1968).

Boundary structure can be conceptualized as being of three types: (a) position or role related; (b) sub-unit; (c) inter-organizational. Position or role related boundary structures are those in which expectations about role performance are determined by requirement from outside as well as by requirements from inside the organization. The sub-unit boundary structure refers to overall hierarchical organization of boundary sub-unit positions. The third type of boundary structure is inter-organizational and refers to links both formal and informal with other organizations and environments (Astrachan, 1973).

The way in which these boundary structures are managed provides information about the organization's coping mechanisms. The coordination among and flow of information across various boundary structures denote management responses to boundary control issues.

Astrachan further asserts that boundary structures can be classified as either programmed or heuristic. Programmed units have little autonomy and also no capacity for response to novelty in the environment. More heuristic units have greater freedom of action to respond to novelty or turbulence in the environment. This author does not view modes of response as either the programmed or heuristic. Rather, programmed-heuristic modes of response forms a continum.

Both extremes of the continuum jeopardize the organization's health and productivity. Overprogrammed responses tend to be rigid and unchangeable, the boundary (as mentioned above) becomes a barrier and leads to death through entropy. Too heuristic of a response jeopardizes the integrity of the organization's boundaries, thus becoming so porous and fluid that it would be hard to define the organization from the environment. How an enterprise understands and tend its boundaries provides insight into how the organization manages its processes.

5) Culture of the Organization:

Culture is an aspect of an organization as it is in communities and societies.

The culture includes traditions, values, and philosophies of the organizations. The organizational ideology and ethos are aspects of the culture. Symbols, slogans, customs, taboos, and prohibitions also represent the cultural properties of institutions.

A major aspect of culture is the mythology of the organization. The mythology of an organization is enacted by folklore and organizational image in the minds of the individuals associated with the organization. Do they view it as an extended family, controlled by a benevolent father or nourishing mother? Is it experienced as a profit-making machine, without morals or a potent noble enterprise devoted to amelioration or psycho-social pathology?

The culture of an organization entails accepted ways of leading and following; norms regarding related to males and females behavior also are part of the culture.

Potentially, the culture can be a source of strain for the enterprise or a source of strength.

Little is known regarding the cultural properties of an enterprise and how the matrix of the individuals' native culture of the organization relates to social structure and processes, tasks, and goals. Newton and Levinson suggest culture and social structure tend to be relatively congruent but in a changing social system the fit will not be perfect. Over time changes in one are likely to produce changes in the other. When culture and goals are not congruent, it may be a source of strain.

An analysis of cultural properties of an enterprise provides another piece of the puzzle.

6) Social Process of the Enterprise:

Social structure provides the framework for enterprises, i.e., division of labor and division of authority. Social process is related to the actual working, dynamics and functions of the enterprise.

Within this domain, social processes can be analyzed on four levels: (1) the group level; (2) the interpersonal level; (3) the intrapersonal level (Klein, et al., 1973), and (4) the inter-group level. Each refer to a behavioral system conceptually different from, and related to the others.

Group level processes refer to the behavior of the group as a social system, as an organism, and the individual relatedness to that system (Bion, 1959). The concept of basic assumption group provides the conceptual framework for understanding an aspect of group-level phenomena, e.g., dependency, fight/flight, pairing and fusion (Turquet). Group level phenomena provide the data about the group transference and counter-transference that occur in the enterprise. Primal horde themes, sibling rivalries, group fantasies surrounding the authority can be operative at the group level. This perspective of group level has emerged from a psychoanalytic framework.

On the other hand, the interpersonal level of a social system refers to the member to member relations that exist in the enterprise. Social psychological principles provides a potent vehicle for understanding the interpersonal processes. The issues of crossed communication; the various roles members take in group settings, e.g., maintenance, properties of an organization are another aspect of the social psychological configuration. In sum, interpersonal level entails the roles individuals take, the communication and interpersonal styles within the organization. As well as, the style and form of management behavior and how it influences the response, motivation and performance of subordinates.

The intra-personal level refers to individual relatedness to himself, fantasy live, management of anxiety and impulse. The focus here is on character traits, unconscious motives, modes of ego defense, ego ideal and life goals. A person will find one organizational system more congruent than another with his inner structural requirements, i.e., how it gratifies his wishes, provides fulfillment of value system and does not tamper with his/her vulnerabilities (Inkels, 1963). The intra-personal level is concerned with how an individual and his behavior fits into the organization.

The intergroup phenomena provides a perspective to comprehend inter- and intra-organizational relations. Analysis of intergroup phenomenon provide such data about; competition of an enterprise; the degree of cooperation and conflict that exist among the various sectors; how sectors may be scapegoated; how the groups develop structure, both formal and informal; and the dynamic of inter-organizational relations.

Since behavior is multi-determined, any social system can be examined and understood in terms of any or all of these levels simultaneously.

More generally, social processes characteristics include rhythms of work, themes of work groups, the dynamics that interfere with the ability of a work group to accomplish its tasks.

Social processes are connecting fibers of the enterprise providing the cement of dynamite of the organization. An analysis of social process will reveal how the enterprise is holding together or splitting apart.

7) Technology of the Institution:

The technology component plays a major role in determining the self-regulatory properties of an enterprise. It functions as one of the major components of the organizational system. Thus, it influences the degree to which an organization achieves its goals. Material, machines and territory make up the technological component (Emery and Trist, 1960).

Homans (1950) asserts that social systems exist within a three part environment: cultural environment (the norms, values and goals of society), a physical environment (the terrain, climate, etc.), and a technological environment (the state of knowledge and skills available to a system for performance of its task). He further postulates that the various environments are fully dependent. Therefore, any change in either environment will produce changes in the other. A change in work technology will produce changes in patterns of interaction, i.e., the Tavistock studies on the long wall coal mining method destroyed some of the primary work groups. Workers' problems might come

from a technological innovation and redesign of work and how it affected the psychological contract between workers and management. Hackman (1973) asserts the way in which the jobs are designed has a significant impact on the motivation and performance of the employee. He postulates that task significance, task variety and task autonomy are important dimensions.

The technology of an enterprise is in part, determined by primary task and its external environment and is an integral part of the enterprise.

8) Resource Generation, Allocation and Utilization of an Organization:

How an institution generates, allocates and utilizes resources reflects the ability of management to survive and cope with the exteranl turbulent environment.

Recruitment of competent employees to carry out the task of the institution refers to the institution's adaptability and foresightedness.

In-house training programs for the employee to reflect the enterprises concern for generating resources.

These are broad problems that can be divided into two major areas. The first, a policy of recruitment, training and allocation designed to get the best performance out of the workers. Oft-time a major dilemma of organization arises because policies and practices which insure organizational effectiveness may often leave an individual's needs unsatisfied and compounded and create problems above and beyond the one the person brought with him/her.

The second is allocation and effective utilization of organizational resources (human, technological and environment). Does the organization mold the individual to fit the positions? Or, changes to provide optimal organization-individual fit. An analysis of how an organization utilizes its resources provides insight about management style, the function of boundary structures and coping-styles.

9) Effectiveness and Efficiency of the Organization:

By effectiveness what is meant is the extent to which the organization is able to meet goals and primary tasks that it sets for itself. For example, question of high or low production and quality of product. Efficiency expresses the relations between the outputs and the cost necessary to attain it (Inkeles and Levinson, 1963).

In addition to the achievement of goals and sub-goals of an organization, Etxioni (1960) asserts the organization must fulfill four major functions for survival: 1) effectiveness, coordination or organizational sub-units; 2) the acquisition and maintenance of necessary resources; 3) adaptation of the organization to the environment and to its own internal demands.

Lawrence and Lorsch point to an optimal degree of differentiation and integration in those parts of the organization that are critical as the best criterion of organizational effectiveness.

Finally, E. Schein (1970), asserts organizational effectiveness hinges upon good communication, flexibility, creativity and genuine psychological commitment. These conditions are to be obtained by 1) recruitment, selection and training practices that stimulate rather than coerce people; 2) more realistic psychological relationship based on a more realistic psychological contract; and 3) more effective group action.

The organizational consultant must look at how the other domains discussed effect the enterprise's performance. This vantage point from which to stand gives a view of the organizational export process.

REFERENCES

1. Goffman, E., Asylums, Doubleday, New York, 1961.

2. Levinson, D.J., Merrifield, J. and Berg, K., "Becoming a Patient," Arch. Gen. Psychiat., 17:385-406, 1967.

3. Guion, R.M., "Personnel Selection," Annual Review of Psychology, 1967.

4. Alderfer, C.P. and McCord, C.G., "Personal and Situational Factors in the Recruitment Interview," J. Applied Psychol., 54:377-385, 1970.

5. Levinson, D.J. and Klerman, G.L., "The Clinician-Executive," Psychiatry, 3-15, 1967.

6. Miller, E.J. and Rice, A.K., Systems of Organization, Tavistock, London, 1967.

7. Rice, A.K., The Enterprise and Its Environment: A System Theory of Management Organization, Travistock, London, 1964.

8. Sheldon, A., Baker, F. and McLaughlin, C., Systems and Medical Care, M.I.T., Cambridge, 1970.

9. Boulding, K.E., "General Systems Theory--The Skeleton of Science," in Buckley, W. (ed.), Modern Systems Research for the Behavioral Scientist, Aldine, Chicago, 1968.

10. Hall, A.D. and Fagen, R.E., "Definition of System," in Buckley, W. (ed.), Modern Systems Research for the Behavioral Scientist, Aldine, Chicago, 1968.

11. Danielli, J.F., "The Bilayer Hypothesis of Membrane Structure," Hospital Practice, 68-71, Jan., 1973.

12. Schneiderman, L., "Social Class, Diagnosis and Treatment," Am. J. Orthopsychiat., 35:99-105, 1965.

13. Hodgson, R.C., Levinson, D.J. and Zaleznik, A., The Executive Role Constellation: An Analysis of Personality and Role Relations in Management, Harvard Business School, Cambridge, 1965.

14. Piven, F.F. and Cloward, R.A., Regulating the Poor: The Function of Public Welfare, Pantheon, New York, 1971.

15. Brill, N.Q. and Storrow, H.A., "Social Class and Psychiatric Treatment," Arch. Gen. Psychiat., 3:340-344, 1960.

16. Harrison, S.I., McDermott, J.F., Wilson, P.T. and Schrager, J., "Social Class and Mental Illness in Children," Arch. Gen. Psychiat., 13:411-417, 1965.

17. Astrachan., B.N., Harrow, M. and Flynn, H.R., "Influence of the Value System of a Psychiatric Setting on Behavior in Group Therapy Meetings," Soc. Psychiat., 3:165-172, 1968.

18. Detre, T., Sayres, J., Norton, N.M. and Lewis, H.C., "An Experimental Approach to the Treatment of the Acutely Ill Psychiatric Patient in the General Hospital," Conn. Med., 25:613-615, 1961.

19. Fleck, S., "Psychiatric Hospitalization as a Family Experience," Acta. Psychiat. Scand., 39, Suppl. 169, 1963.

20. Lynton, R.P. "Linking an Innovative Subsystem into the System," Admin Science Quarterly, 4:388-415, 1969.

21. Community Mental Health Centers Act of 1963, Public Act 88-164, Federal Register, May 6, 1964.

22. Astrachan, B.M., "Many Modest Goals: The Pragmatics of Health Delivery," Conn. Med. (in press, 1973).

23. Baker, F. and O'Brien, G., "Intersystems, Relations and Coordination of Human Service Organizations," Am. J. Public Health, 61:130-137, 1971.

24. Tichler, G.L., "The Effect of Consumer Control on the Delivery of Services," Am. J. Orthopsychiat., 41:501-505, 1971.

25. Tischler, G.L., Henisz, J., Myers, J. and Garrison, V., "The Impact of Catchmenting," Administration in Mental Health, 1:22-29, Winter, 1972.

MODULE IV

MODULE IV: MANAGERIAL STYLE AND PLANNING FOR CHANGE **TIME:** 2 HOURS 35 MINUTES

GOALS

- To enable participants to relate their own program issues to such concepts as situational leadership theory and Sherwood's Model of Planned Renegotiation.

OBJECTIVES

At the end of this Module, participants will be able to:

- Describe the elements of a "planned renegotiation" process which participants will use to deal with organizational change
- Graph their own personal management/leadership styles as prevention program managers.

MATERIALS

- Newsprint
- Pens
- Pencils
- Magic Markers
- Participant Manuals
- Worksheets
- Reference Sheets
- Selected Reading

MODULE IV	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. APPLYING THE SITUATION MODEL	30 MINUTES	SMALL-GROUP AND LARGE-GROUP EXERCISE/DISCUSSION
2. SCORING THE MANAGERIAL STYLE PROFILE	20 MINUTES	INDIVIDUAL EXERCISE
3. PROFILES	25 MINUTES	SMALL-GROUP DISCUSSION
4. THE CONSTANT IN PREVENTION CHANGE	15 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
5. THE MODEL OF PLANNED RENEGOTIATION	20 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
6. APPLYING THE CONCEPT OF PLANNED RENEGOTIATION	30 MINUTES	SMALL-GROUP EXERCISE
7. SUMMARY	15 MINUTES	LARGE-GROUP DISCUSSION

SCORING THE MANAGERIAL STYLE PROFILE

STEP I:

Use the chart below to transfer your answers from the problem sheet by circling the letter you selected as your preferred option. Add the number of circles in each column and record that number in the column total box.

Problem	Column I	Column II	Column III	Column IV
1	A	C	B	D
2	B	C	D	A
3	C	A	D	B
4	B	A	C	D
5	C	B	D	A
6	B	C	D	A
7	A	C	B	D
8	B	D	A	C
9	C	B	D	A
10	A	B	C	D
11	A	C	B	D
12	D	B	C	A
Column Totals				

Step II:

In the diagram below, place the number you show as a total in Column I in the space marked Quadrant I. Follow the same procedure for Columns II, III, and IV. The diagram is complete when there is a number in each quadrant.

Quadrant I	Quadrant II
Quadrant III	Quadrant IV

Step III:

Once again, use the chart below to transfer your answers from the problem sheet by circling the letter you selected as your preferred option. Add the number of circles in each column and record that number in the column total box.

Problem	Column I	Column II	Column III	Column IV
1	D	B	C	A
2	A	B	D	C
3	C	B	A	D
4	B	A	C	D
5	A	D	B	C
6	A	D	B	C
7	A	C	D	B
8	B	D	A	C
9	A	D	B	C
10	A	D	C	B
11	A	C	D	B
12	D	B	C	A
Column Totals				
		multiply by		
	-2	-1	+1	+2

Total =

Step IV:

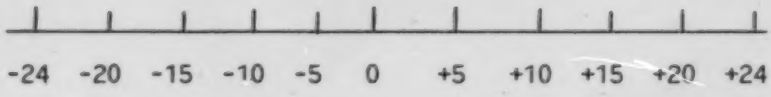
The next step is to do some arithmetic. Take the number in each column and do the multiplication as indicated. For example, if your total in Column I is 2, you would multiply 2 by -2, and your answer would be -4. Follow the same procedure for each column.

Step V:

Now add the figures in each column. For example, Column I is -4; Column II is 0; Column III is 5; Column IV is +10. Your total score will be +11.

Step VI:

Using the scale below, locate the number which corresponds to the total you received after the addition of the figures in Columns I-IV. Place an X on the scale at the corresponding number.



Interpreting the Style Profile

1. The problems on the profile are written in such a manner that if answered perfectly, there would be three responses in each quadrant.

3 Quadrant II	3 Quadrant III
3 Quadrant I	3 Quadrant IV

2. It is rare that anyone's score sheet looks that way. What usually happens is that the distribution of the responses will reflect a preferred style and a back-up style. For example:

6 Quadrant II	4 Quadrant III
2 Quadrant I	0 Quadrant IV

The person's preferred style is Quadrant II with Quadrant III as a back-up style. He/she also has the flexibility to use Quadrant I, but less often. He/she does not naturally use Quadrant IV.

3. What this part of the profile reflects is the person's preferred style and an indication of their flexibility to use other styles when appropriate.

4. No value judgments should be placed on your results. It is simply data to be examined in the light of a particular theoretical model.

5. Step IV on the scoring sheet determines an effective rating based on the number of responses which fell in the +2, +1, -1, -2 columns. Those responses in Column IV (+2) are considered to be the most appropriate.

6. The effectiveness rating could range from -24 to +24. It is quite possible that a lower effectiveness rating will correlate with a strong tendency toward one participant quadrant. For example, if a person has a score of 9 in Quadrant II, he/she will have selected that option at least 6 times when it was not the most appropriate response, therefore, a lower effectiveness score.

THE MANAGERIAL STYLE PROFILE

DIRECTIONS: Read each problem description carefully. Then look at the options offered as a response to the problem. Select the option which MOST CLOSELY REPRESENTS WHAT YOU WOULD DO if you were the manager in the situation described. Circle the option you select.

1. The prevention team leaders in your prevention program appear to be having serious problems getting the job done. Their performance has been going downhill rapidly. They have not responded to your efforts to be friendly or to your expressions of concern for their welfare.

   What would you do?

   a. Re-establish the need for following program procedures and meeting the expectations for task accomplishment.

   b. Be sure that staff members know you are available for discussion, but don't pressure them.

   c. Talk with your team leader and then set performance goals.

   d. Wait and see what happens.

2. During the past few months, the quality of work done by staff members has been increasing. Recordkeeping is accurate and up-to-date. You have been careful to make sure that all staff members are aware of your performance expectations. What would you do?

   a. Make no changes.

   b. Continue to emphasize the importance of completing tasks and meeting deadlines.

   c. Be supportive and provide clear feedback. Continue to make sure that staff members are aware of performance expectations.

   d. Make every effort to let staff members feel important and involved in the decision making process.

3. Performance and interpersonal relations among your staff have been good. You have normally left them alone. However, a new situation has developed, and it appears that the staff is unable to solve the problem themselves. What would you do?

   a. Bring the group together and work as a team to solve the problem.

   b. Continue to leave them alone to work it out.

c. Act quickly and firmly to identify the problem and establish procedures to correct it.

d. Encourage the staff to work on the problem, letting them know you are available as a resource and for discussion if they need you.

4. You are considering a major change in your prevention approach. Your staff has a fine record of accomplishment and a strong commitment to excellence. They are supportive of the need for change and have been involved in the planning. What would you do?

a. Continue to involve the staff in the planning, but you direct the change.

b. Announce the changes and then implement them with close supervision.

c. Allow the group to be involved in developing the change, but don't pressure them.

d. Let the staff manage the change process.

5. You are aware that staff performance has been going down during the last several months. They need continual reminding to get tasks done on time and seem unconcerned about meeting objectives. In the past, redefining procedures and role expectations has helped. What would you do?

a. Allow your staff to set their own direction.

b. Get suggestions from the staff but see that the objectives are met.

c. Redefine goals and expectations and supervise carefully.

d. Allow the staff to be involved in setting the goals, but don't pressure them.

6. You have just taken over as the director of an alternatives program that had been running smoothly under the previous director. He had the reputation for running a tight ship. You want to maintain the quality of the program, but you would like to begin humanizing the environment. What would you do?

a. Do nothing at the present time.

b. Continue with the administrative pattern set by the previous director, monitoring the staff and emphasizing the importance of task accomplishment.

c. Get the staff involved in decision making and planning, but continue to see that objectives are met and quality is maintained.

d. Reach out to staff members to let them feel important and involved.

7. You are considering expanding your school-based program to incorporate a new community-based program. Your staff members have made suggestions about the proposed change and are enthusiastic. They operate effectively on a day-to-day basis and have shown themselves willing to assume responsibility. What would you do?

a. Outline the changes and monitor carefully.

b. Reach consensus with the staff on the proposed changes and allow the staff members to organize the implementation.

c. Solicit input from the staff on proposed changes, but maintain control of the implementation.

d. Let the staff handle it.

8. Staff have been working well. Interpersonal relations and morale are good. The quality of service delivery is excellent. You are somewhat unsure of your apparent lack of direction of the group. What would you do?

a. Be careful not to hurt your relationship with the staff by becoming too directive.

b. Take steps to assure that staff members are working in a well defined manner.

c. Leave the staff alone to work as they have been.

d. Discuss the situation with the staff and then initiate the necessary changes.

9. The Director of the Single State Agency has appointed you to replace the chairman of a task force that is long overdue in making requested recommendations for state prevention grant priority. The group is not clear on its goals. Attendance at meetings has been poor. Frequently, the meetings are more social than task oriented. Potentially, they have the knowledge and experience to complete the task. What would you do?

a. Let the group members work out their problems.

b. Solicit recommendations from the group, but see that the objectives are met.

c. Redefine and clarify the goals, tasks, and expectations, and carefully supervise progress toward task completion.

d. Allow group involvement in setting goals, but don't push.

10. Your team leaders are usually able to take responsibility. However, they are not responding well to your recent redefinition of performance standards. What would you do?

a. Supervise carefully to assure that standards are met.

b. Solicit input from the staff on performance standards. Incorporate their suggestions and monitor their progress toward meeting the standards.

c. Allow staff involvement in the redefinition of performance standards, but don't push.

d. Avoid confrontation. Apply no pressure and see what happens.

11. You have been made supervisor of a staff of eight group facilitators. The previous supervisor appeared to be uninvolved in the affairs of the staff. They have adequately handled their tasks and responsibilities. Their morale is high. What would you do?

    a. Become active in directing the staff toward working in a clearly defined manner.

    b. Involve your staff in decision making and consistently reinforce good contributions.

    c. Discuss past performance with your staff and then examine the need for new procedure.

    d. Continue to leave the staff alone.

12. You have recently become aware of some internal difficulties in your staff. They had been working well together for the past year. The staff has an excellent record of accomplishment. Staff members have consistently met their performance goals. All are well qualified for their roles in the program.
What would you do?

    a. Allow your staff to deal with the new problem themselves.

    b. Tell the staff how you propose to deal with the situation and discuss the necessity for these procedures.

    c. Make yourself available for discussion but don't jeopardize your relationship with the staff by forcing the issue.

    d. Act quickly and firmly to nip the problem in the bud.

PLANNED RENEGOTIATION: A NORM-SETTING OD INTERVENTION

By

John H. Sherwood and
John C. Glidewell

This article is reprinted, with permission, from the 1973 Annual Handbook for Group Facilitators, pp. 195-201.

PLANNED RENEGOTIATION: A NORM-SETTING OD INTERVENTION

Organizational development has been described as "an educational process by which human resources are continuously identified, allocated, and expanded in ways that make these resources more available to the organization and, therefore, improve the organization's problem-solving capabilities" (Sherwood, 1971). The concept of planned renegotiation describes a procedure by which controlled change can enter an organization in such a way that resources become more available to the organization. It is derived from a clear and simple theory of how roles are established and changed (Glidewell, 1971).

The theory itself is a norm-setting intervention because it is intended to become part of the normative structure of an organization and as such to become part of the language, rhetoric, and expectations of the members of the organization. Furthermore, the use of these concepts in successful problem-solving leads to the learning of behavioral skills by insight, reinforcement, and imitation. As we often like to hear Lewin (1951) say, there is nothing as practical as a good theory. Where the concept of planned renegotiation becomes part of the norms of an organization, it can constitute the heart of an OD effort.

THE MODEL

The model describes how social systems--that is, relations between persons and relations between groups--are established and become stabilized so that work can get done and how change can enter the system. The model is cyclical, and it includes four phases:

(1) Sharing information and negotiating expectations. When persons begin to establish a relationship which they expect may endure over some period of time--as brief as a pre-employment interview or as long-lasting as a marriage or an appointment to the U.S. Supreme Court--they first exchange information. They are essentially trading information about themselves and establishing expectations--usually implicit and unspecified--about how a "member" of this relationship or a member of this group is going to behave (see Goffman, 1956, p. 162, 1961, pp. 105-132; Thibaut and Kelley, 1959, pp. 21-25; Blau, 1960).

Once a sufficient exchange of information occurs, uncertainty is reduced to an acceptable level and the behaviors of the parties are more or less predictable. If the relationship is seen as enduring sometime into the future, then commitment to these shared expectations takes place.

(2) Commitment. When commitment to a set of shared expectations takes place, then each member's role is defined, and each member knows for the most part what is expected of him and for the most part what he can expect from the others. The strength of each individual's commitment and the range of his behavior encompassed by his role are both measures of the importance or centrality to him of this particular relationship. The more important the relationship, the more evidence of commitment is required and the more behaviors--including attitudes, values, and perceptions--are embraced by the role expectations. With commitment comes stability.

(3) Stability and productivity. When there is commitment to a set of shared expectations, these expectations govern the behavior of group members and provide stability within the relationships; that is, for the most part you do what I expect of you and for the most part I do what you expect of me. This stability in the relationships leads to the possibility that work can now get done. While stability does not guarantee productivity, it is necessary for productive work to occur. The energy of the principals is now available for other things since their relationships are sufficiently predictable that they no longer required sustained attention.

Commitment to a set of shared expectations, then, governs behavior during a period of stability; but invariably, sooner or later, disruption occurs (Blau, 1967; Homans, 1961).

(4) Disruption. Disruption occurs because of a violation of expectations by the principals or because of external intrusion into the system. It is assumed that disruption is inevitable; only the duration of the period of stability varies because (a) information is never completely shared during the initial period when expectations are negotiated and (b) individuals, groups, and organizations are viewed as open systems (Katz & Kahn, 1966), i.e., they change as a consequence of transactions with their environment (Glidewell, 1971).

Disruptions may be external in origin, such as a new person assigned to a work group, a loss of personnel, an assignment of a new task or higher quota, a budgetary cut and reallocation of resources, or reorganization of personnel and subsequent reassignment of duties. The first child born into a marriage is an example of a new input into the relationship which is likely to lead to the violation of previously established expectations. Disruptions may also be internal in origin, such as, the sharing of information which was not made available earlier when expectations were being negotiated. Persons also change as a consequence of new experiences, training, and education. When the changed person returns to the unchanged role, expectations may be violated leading to a disruption of the relationship.

It is at the point of disruption that change can enter the system, for it is at this time that expectations are no longer fixed. New information can now enter the system, and the renegotiation of expectations can occur. Once again the system recycles through: (1) sharing information and renegotiating expectations, followed by (2) commitment to a set of expectations which governs behavior during a period of (3) stability and productivity, when, for the most part, you do what I expect of you and I do what you expect of me until (4) disruption once again occurs because of a violation of expectations by the principals or because of external intrusion into the system. With disruption change can once again enter the system, as it cycles from renegotiation through disruption, and yet another opportunity for renegotiation (see Figure 1).

The paradox is that the very moment the system is most open to change there are strong inhibiting forces working to return things "to the way they used to be" because of anxiety accompanying the uncertainty which characterizes the system at the time it is in a state of disruption (Lanzetta, 1955; Korchin et al., 1957).

When a disruption of expectations occurs, uncertainty follows--because I can no longer depend on your doing what I expect of you, and my own role is also unclear to me--and with uncertainty the principals become anxious. The anxiety is uncomfortable. The quickest and surest way to reduce that anxiety is for the relationship to return once again "to the way things used to be." This is often a ritualized commitment to prior expectations, such as a perfunctory apology, handshake, or embrace, without admitting into the system the new information, which is now available having given rise to the disruption. This new information would form the basis for renegotiating the expectations governing the relationship. The relationship remains closed to change when the parties deal with the uncertainty and anxiety produced by disruption by returning to the original level of sharing expectations without renegotiation: for example, the pledge, "it won't happen again," or the admonition, "don't let it happen again," or the reaffirmation of the way things used to be, "let's be gentlemen," or "I'm sorry, I was wrong, everything is now okay...nothing is changed!" (Postman & Bruner, 1948; Hermann, 1963).

It is during the period of disruption, when the parties are uncertain about their roles and the future of the relationship and are therefore anxious, that the system must be held open if change is to enter. If new information is allowed to enter the relationship and is treated in a problemsolving way, it can provide the basis for renegotiating the expectations governing the relationship. The newly renegotiated expectations are therefore more likely to be in line with the current realities of the situation, and once commitment occurs, the period of stability is likely to be more enduring before the next ensuring disruption.

If the parties share this model as a part of their language and their mutual expectations, these concepts are likely to help them by increasing their tolerance for the uncertainty and the accompanying anxiety which surround their relationship while expectations are held open during renegotiation. Through continued use of these concepts, the behavioral skills of the parties also increase, thereby facilitating the renegotiation process.

The theory predicts that disruption without renegotiation leads to an increasing frequency and intensity of disruptions. When each disruption is not treated as a new source of information and a new opportunity for adjustment of expectations and change, but rather as a disagreeable state that cannot be tolerated due to the urgency to return "to the way things used to be," then the source of the disruption is never satisfactorily remedied, improved, or even ameliorated. If the problem or difficulty in the relationship is never addressed directly, it is likely to persist and add to the intensity of future disruptions precipitated by new problems entering the relationship./1/ The more inflexible the system--a two-person relationship, a group, an organization, or a community--the more likely a final disruptive event will be explosive and destructive. Such a relationship is likely to be terminated in a manner which is destructive to the parties involved.

---

[1] The intensity of future disruptions is not likely to be increased where problems or difficulties in a relationship are handled by reducing commitment to the relationship. In this case, an apparent "return to the way things used to be" is actually a withdrawal of commitment. Over time such a strategy leads to an atrophied relationship. (In the Marriage Grid (1971) by Mouton and Blake, this is a 1,1 orientation, e.g., "Home is where I eat, sleep, and keep my things.")

Whenever disruption occurs, the possibility of terminating the relationship is always an alternative solution. Termination is more likely to be a constructive, problem-solving solution when it is a consequence of renegotiation. Termination is more likely to result in the destructive loss of resources when one or more of the following are present: (1) the disruption is unplanned and explosive, (2) the system is rigid and inflexible, or (3) the parties have little or no prior experience in renegotiating adjustments to changing conditions.

PLANNED RENEGOTIATION

The model states that relationships cycle through (1) the sharing of information and negotiation of expectations, through (2) commitment to (3) stability and productivity to (4) disruption and the possibility of renegotiation and therefore change. It has also been assumed that it is difficult to hold the system open for renegotiation because of the uncertainty and anxiety that prevails at that time. These concepts then provide a way to introduce controlled change by anticipating disruption and renegotiating expectations in advance. This is known as planned renegotiation.

Where this simple model of how roles are established and how they change is available to the parties and where they have skills in sharing their reactions, feelings, and perceptions about their relationship, change can be introduced in a controlled and systematic way through planned renegotiation. This is less stressful than renegotiation under conditions of disruption. Both the model and the concept of planned renegotiation thus become parts of the relationship so that "whenever I feel a pinch," that pinch is shared and the possibility of renegotiation is raised. A pinch is a signal of the possibility of an impending disruption, and it describes a sense of loss of freedom within one's current role (see Figure 1). The felt loss of freedom may be due to a sense of expanded resources or to subtle constriction of expectations by others. In either case, there is the possibility of resources lost to the system.

Some examples of pinches which raise the possibility of renegotiation are:

"I think I am now ready to go to New York on a buying trip without you."

"I find that I am defensive with you because you judge others so harshly. I don't want you judging me that way."

"While I will continue to do all the drafting work, I would like to do some engineering work on this project."

"I think that I somehow have to know all the answers because no one in this group ever admits that they don't know something. I therefore bluff my way along."

"We are always talking about how bright we all are, and as a consequence I am becoming more and more cautious about the ideas I choose to share lest they appear anything but brilliant."

"I have to begin saying, "no," to you, or you have to stop adding to my workload. I will be unable to meet the commitments I have already made unless something is changed."

"I like you a lot, and I suddenly realize that I am very hesitant to disagree with you for fear that you will then dislike me."

When the question of renegotiation of expectations is raised at that point in the relationship when one of the members feels a pinch, the parties have more choice and more control over change. They are subject to fewer negotiations "under fire," and they are less often victims of crises and pressures to return to the way things used to be.

IMPLICATIONS AND DISCUSSION

Planned renegotiation is likely to be a successful norm-setting intervention in an organization where there is some prior commitment to the concept of organization development so that persons are neither so closed that differences are ignored and inappropriately smoothed over nor so competitive that differences are exploited by subversive rivalry.

On the other hand, people need concepts to guide their behavior. Organization development efforts often involve skill training in interpersonal relations, or process consultation, or prescriptions to do things differently, such as "be open." However, they are trained in interpersonal skills without an adequate theoretical framework that provides awareness of themselves and make more data available to the system, but what can they do with data once it becomes more available? The planned renegotiation model supplies a framework for building more productive working relationships with information generated through organization development efforts.

Similarly, participant management systems need more information from all levels of supervision in order to function effectively, but once the information is generated, how is it to be handled? The planned renegotiation model provides a framework for allowing new information to change the system where such change is agreeable to all parties involved.

The theory underlying the concept of planned renegotiation is clear, simple, and straightforward. Theoretical elaborations have been purposely avoided. It is intended that the concepts become part of the language of organizational life. Persons can be trained in the skills of planned renegotiation. It is important that people learn to detect pinches before disruptions develop. A pinch is felt by an individual, whereas a disruption is experienced by all parties involved in the relationship. It is therefore incumbent upon an individual who feels a pinch to take responsibility for raising the question of renegotiation with the other(s), rather than asserting that it is someone else's problem or responsibility. At the same time, it is important he understand that when he experiences a pinch, this is going to make him anxious. When a pinch is shared and renegotiation considered, then others become anxious as well. People get anxious both because they are never sure whether they will personally be better off after the renegotiation is completed than they were before. When people work with this model, they learn that anxiety becomes controlled and tolerable when there is a commitment to problem-solving. There remains nevertheless a risk each time the relationship is opened for examination and renegotiation.

In the first few attempts at renegotiation within the model, people are simultaneously working on two problems: (1) trying out a problem-solving model and developing skills and procedures for its use and (2) working on the

pinch that gave rise to the renegotiation. Over time both skills and procedures develop, as does confirmation of the model and its usefulness to the parties involved (or its lack of usefulness).

Based on the assumption that "most people in organizations prefer a fair negotiated settlement to a state of unresolved conflict," Harrison (1971) has developed a very sound procedure for changing role relationships. It should be useful to those who would like to try planned renegotiation in a formally structured and specifically programmed way. Harrison calls his procedure "role negotiation." It is a detailed program for exchanging expectations and demands for the behavior of others in terms of what each wants others (a) to do more or better, (b) to do less, or (c) to remain unchanged. These expectations are written so as to be clearly understood by both sender and receiver. When one person makes a request or demand for changed behavior on the part of another, he must specify a quid pro quo he is willing to give in order to get what he wants. The process is complete when an agreement is written which specifies the agreed-upon changes in behavior and makes clear what each party is expected to give in return, including a discussion of possible sanctions for noncompliance. The procedures are clear and simple, if a bit mechanical, and they require a consultant in the early stages to establish the rules and to moderate their use.

There are various other ways organizations might make use of the concept of planned renegotiation. An organization might design a "renegotiating arena," where the principals commit themselves not to leave the field until a satisfactory set of mutual expectations is established./2/ A skilled third party consultant might be available to them (see Walton, 1969).

The question is sometimes raised, "if planned renegotiation is encouraged, won't this lead to the termination of some relationships that would not otherwise terminate?" Yes, it probably will. Where relationships are terminated by choice, this is likely to be an outcome which is more healthy for the individuals and more productive for the organization over the long run, than to retain members who are essentially "captive."

While the theory of how roles are established and changed seems to be interpersonal in focus and appears to concentrate on the modification of behavior in one-to-one situations, the concepts also describe the relation of a person to a group of the relations of all members of a group to one another, e.g., task group, committee, subordinates reporting to one supervisor, family, etc.

---

[2]The method, "Meetings for Two" in Fordyce & Weil (1971, pp. 114-16), is a highly structured session designed to provide the opportunity to renegotiate expectations in a two-person relationship without the benefit of a theoretical model. While a third party is not required, the procedure is so highly structured that the presence of a third person seems almost essential.

Relations between groups are also subject to disruption and renegotiation as well, e.g., relations between departments, branch offices, or project teams./3/

Rather than a theory of interpersonal affairs, the theory is better described as a description of the establishment and change of relations between elements of a social system-persons or groups. The theory is more encompassing than it first might seem; it can include some of the major realities of organizational life, such as the power of economics and legitimate authority and the competition between persons or groups for scarce resources. A subordinate can certainly raise the question of renegotiation with his supervisor and can help his supervisor learn to use the model. Issues of authority can be subjects of renegotiation. Where individuals or groups are highly competitive, renegotiation can take the form of more open bargaining rather than secretive, and sometimes subversive, rivalry.

While all of us need concepts to guide our behavior, it would seem that the model of how roles are established and changed and the concept of planned renegotiation would be particularly useful for those who frequently enter and work with temporary systems (Bennis & Slater, 1968). The more fluid and changing the system, the more important it is to be able to develop means of producing information rapidly which then permits people to appropriately influence one another and to accept appropriate influence. Furthermore, working with this model even within an enduring and established relationship is likely to help a person develop those behavioral skills which are effective in life in temporary systems. These concepts are also those who play a mediating role as a third party consultant to others in conflict.

SUMMARY

This paper is based on the assumption that people need concepts to guide their behavior. A clear and simple model of how roles are established and changed is presented: relationships cycle through (1) the sharing of information and the negotiation of expectations, then (2) commitment to a set of expectations which governs behavior during a period (3) of stability and productivity when, for the most part you do what I expect of you and I do what you expect of me, until (4) disruption occurs and the possibility of change enters the system. This theory itself is a norm-setting intervention into an organization when it becomes a part of the normative structure, language, and expectations of members of the organization.

The concept of planned renegotiation is derived from this model and represents a procedure by which controlled change can enter an organization, thereby freeing and expanding resources for problem-solving. This enhances an organization's internal flexibility, which is one important criterion of organizational effectiveness (Schein, 1965).

With a model such as planned renegotiation, people have more choice in their lives and are less likely to become victims "of the way things used to be...."

---

[3]Several persons have reported that this model is also useful for negotiating change in the behavior of a single person (intrapersonal change). Persons have talked to themselves about themselves and held dialogs in a Gestalt fashion between "how I am now" and "how I would like to be," followed by commitment to a new set of expectations, stability, disruption, and renegotiation.

REFERENCES

Bennis, W.G. & Slater, P.E. The temporary society. New York: Harper, 1968.

Blau, P.M. Exchange and power in social life. New York: Wiley, 1967.

Blau, P.M. A theory of social integration, American Journal of Sociology, 1960, 65, 550-553.

Fordyce, J.K. & Weil, R. Managing with people: A manager's handbook of organization development methods. Reading, Massachusetts: Addison-Wesley, 1971.

Glidewell, J.C. System linkage and distress at school. In M.J. Feldman (Ed.), Studies in psychotherapy and behavior change. Buffalo, New York: State University of New York at Buffalo, 1971. Pp. 25-44

Goffman, E. The presentation of self in everyday life, Edinburgh, Scotland: University of Edinburgh, 1956.

Goffman, E. Encounters, Indianapolis: Bobbs-Merrill, 1961.

Harrison, R. Role negotiation: A tough minded approach to team development. In W.W. Burke & H.A. Hornstein (Eds), The social technology of organization development. Washington, D.C.: NTL Learning Resources Corporation, 1971.

Hermann, C.F. Some consequences of crisis which limit the viability of organizations. Administrative science quarterly. 1963, 8, 61-82.

Homans, G.C. Social behavior: Its elementary forms. New York: Harcourt, Brace & World, 1961.

Katz, D. & Kahn, R.L. The social psychology of organizations. New York: Wiley, 1966.

MODULE V

MODULE V: MANAGEMENT TOOLS **TIME:** 4 HOURS

GOALS

- To familiarize participants with the concepts of needs assessment, planning, and evaluation to prepare them to work cooperatively with prevention evaluators.

OBJECTIVES

At the end of this Module, participants will be able to:

- Identify the three basic phases of a needs assessment process
- Write clear, specific, and measurable program objectives
- Enable participants to list the five components of a logical program development process
- Acquaint participants with the three types of evaluation described in NIDA's Prevention Evaluation Research Model
- Enable participants to list 1-, 3-, and 5-year goals for their programs.

MATERIALS

- Pencils
- Newsprint
- Magic Markers
- Participant Manual
- Worksheets
- Figures
- Reference Sheets
- Selected Readings

MODULE V	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. INTRODUCTION	5 MINUTES	LARGE-GROUP
2. THE REAL/IDEAL	30 MINUTES	INDIVIDUAL EXERCISE
3. NEEDS ASSESSMENT	10 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
4. GATHERING NEEDS ASSESSMENT DATA	20 MINUTES	INDIVIDUAL/SMALL-GROUP EXERCISE
5. PLANNING	20 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
6. WRITING SPECIFIC PROGRAM OBJECTIVES	30 MINUTES	INDIVIDUAL EXERCISE
7. FUTURE PLANNING	30 MINUTES	INDIVIDUAL/TRIAD EXERCISE
8. EVALUATION	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
9. EVALUATION RESOURCES	25 MINUTES	LARGE-GROUP EXERCISE/DISCUSSION
10. POLITICS AND EVALUATION	20 MINUTES	LARGE-GROUP DISCUSSION
11. WRAP-UP	5 MINUTES	LARGE-GROUP LECTURE

MODULE V: MANAGEMENT TOOLS-1 *WORKSHEET*

SITUATION/PROGRAMMATIC or COMMUNITY	"THE REAL" WHAT EXISTS NOW	"THE IDEAL" WHAT YOU'D LIKE TO SEE
1.		
2.		
3.		

NATIONAL DRUG ABUSE CENTER

WRITING SPECIFIC PROGRAM OBJECTIVES

A Self-Instructional
Learning Package

Adapted from Basic Management Skills: Resource Manual, pp. 217-249, National Drug Abuse Center for Training and Resource Development, Rosslyn, Va,, 1977.

INTRODUCTION

This self-instructional module is designed to help you learn how to write objectives that are clear and specific.

When you have completed this learning package, you will be able to do the following:

1. Distinguish a goal from an objective;

2. Identify program objectives that are specific, measurable, and time-phased; and

3. Write program objectives that are specific, measurable, and time-phased.

If you are confident that you already know how to write specific program objectives, please take the pretest. When you have finished, check your results with the trainer. If both your objectives are approved by the trainer, you will have met the objectives of the learning package.

Or, if you prefer, skip the pretest and turn immediately to the instructions.

* * * * * *

INSTRUCTIONS

Complete each part before turning to the next part. Read the material and answer the question in each part then check your answer.

Now begin.

* * * * * *

What is the difference between goals and objectives?

A goal is a general statement of what we intend to do. Because goals are stated in general terms, they can be interpreted in many different ways.

An objective is much more specific than a goal. A well-stated objective leaves little doubt about exactly what will be done, how this will be measured, and when it will be accomplished.

Is the following statement a goal or an objective? "Drug abuse will be reduced."

Answer: _____

If you said goal, you were right. The statement is too general to be a good objective.

If you said objective, take another look at the statement. Does it tell you how drug abuse will be measured, or how much it will be reduced, or by what date?

Is the following statement a goal or an objective?

"The incidence of arrests for drug abuse in Center City will be reduced by 10 percent within one year."

Answer: _____

* * * * * *

If you said objective, you were right. The statement clearly specified what the result would be (incidence of arrests for drug abuse in Center City will be reduced), how this will be measured (reduced by 10 percent) and when (within one year).

In the space below, write the difference between a goal and an objective.

* * * * * *

List below the three essential characteristics of a useful objective.

1.

2.

3.

Now go to the next page.

* * * * * *

The three essential characteristics of a useful objective are the following:

1. It states specifically the result to be accomplished.
2. It is expressed in measurable terms.
3. It identifies when the result will happen.

Let's concentrate on the first two characteristics of a good objective:

1. It states specifically the result to be accomplished.
2. It is expressed in measurable terms.

Put an X in the box beside each of those statements below that:

- Specifically state a result; and
- Are expressed in measurable terms.

1. ( ) Establish drug abuse referral systems in the five largest police departments in this State.
2. ( ) Provide drug abuse prevention training to school teachers.
3. ( ) Design four weekend recreation activities to involve 25 inner city youth.
4. ( ) Reduce drug abuse to a level acceptable to the public.
5. ( ) Conduct a campaign to increase public awareness of substance abuse-related problems.
6. ( ) Increase by two the number of community groups voluntarily contributing goods or services to the drug abuse prevention program on a regular basis.
7. ( ) Reduce by 20 percent the number of drug emergencies at the hospital through drug education in area schools.
8. ( ) Explore formation of a State drug abuse prevention program association.
9. ( ) Initiate an assessment of substance abuse prevention problems in the community.
10. ( ) Establish a peer group rap meeting for junior high students that is acceptable to the students.

You should have placed an X before statements 1, 3, 6, 7, 10.

Take another look at any you missed. Do those statements tell you specifically what the expected result is and how it is to be measured?

* * * * * *

The third characteristic of a useful objective is the time frame, which states exactly when the result will happen, or by what date it will be completely accomplished.

Which of the following statements specify a clear time frame?

1. As soon as possible
2. By the last day of each month
3. Immediately
4. When feasible
5. By July 1, 1977

Answer: _____

* * * * * *

Numbers 2 and 5 specifically state by what time or date we could expect a result to happen. The other statements don't tell us how soon is "possible," when is "immediately" (today? this week?), or how soon "feasible" is.

Useful objectives must specify when a result will happen by stating a date or giving the number of days, months, or years.

List again the three characteristics of a useful objective.

1.

2.

3.

If you are not sure, check your answers.

Worksheet V-2 Continued

Now try to find each of the three characteristics in the objective below.

Objective:

Provide 40 hours of in-service training annually to all elementary school teachers within five years.

1. Underline the parts of this objective that state the intended result.
2. Place a square around the parts that are measurable.
3. Circle the time frame.

* * * * * *

Your answer should look like this.

Provide 40 hours of in-service training annually to all elementary school teachers within five years.

Now do the same with the following objectives.

1. Underline the specific result intended.
2. Put a square around the measurable parts.
3. Circle the time frame.

1. Develop prevention program objectives that are consistent with the goals of the program within one year.
2. Establish a recordkeeping system for prevention activities acceptable to NIDA by the beginning of the next budget year.
3. Provide 30 hours of training to 350 shop foremen in identifying and counseling potential and actual drug abusers by September 30, 1979.

* * * * * *

The answers are:

1. Develop prevention program objectives that are consistent with the goals of the program within one year.
2. Establish a recordkeeping system for prevention activities that is acceptable to NIDA by the beginning of the next budget year.
3. Provide 30 hours of training each to 350 shop foremen in identifying and counseling potential and actual drug abusers by September 30, 1979.

Worksheet V-2 Continued

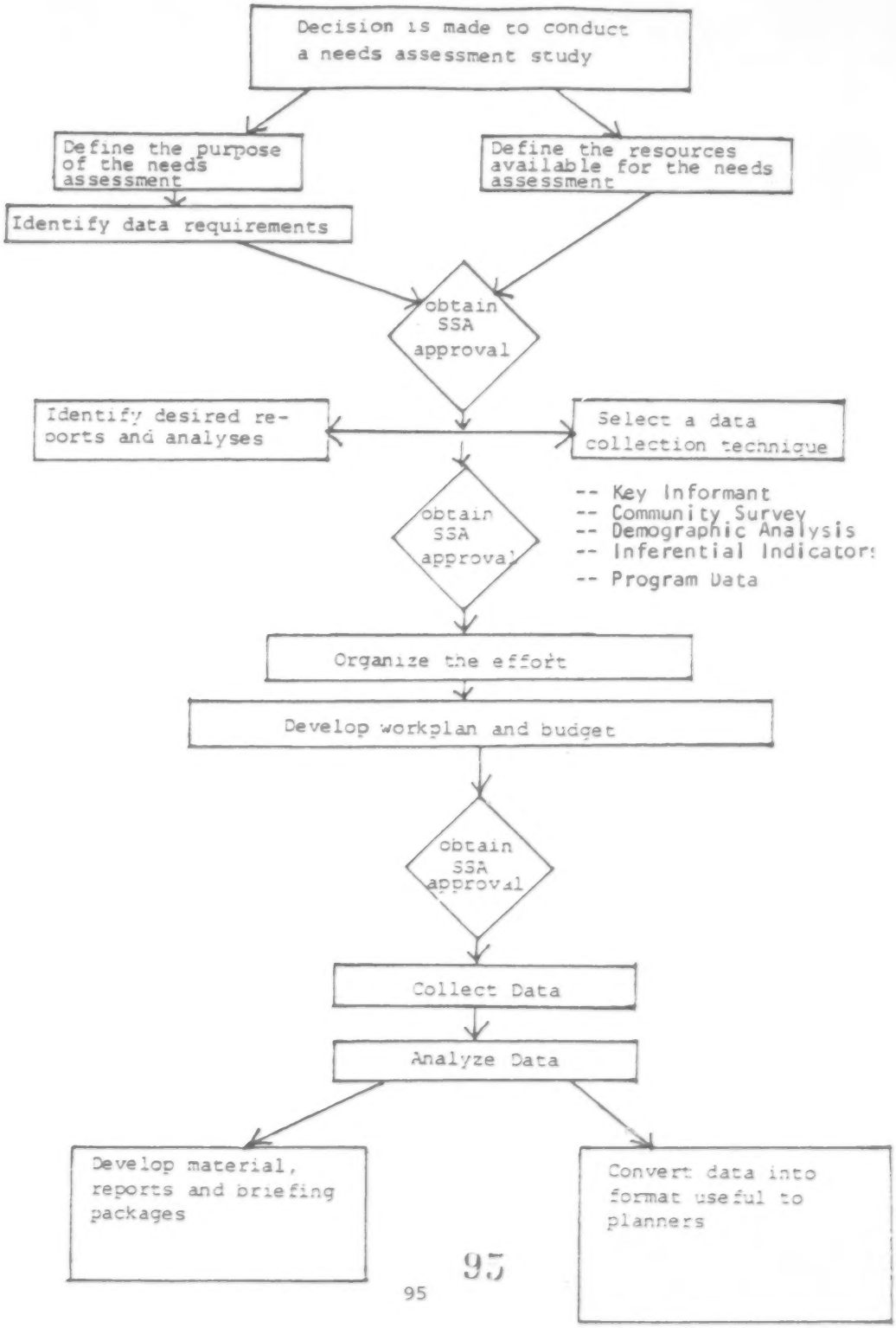
Write two specific program objectives for your prevention program that you consider important.

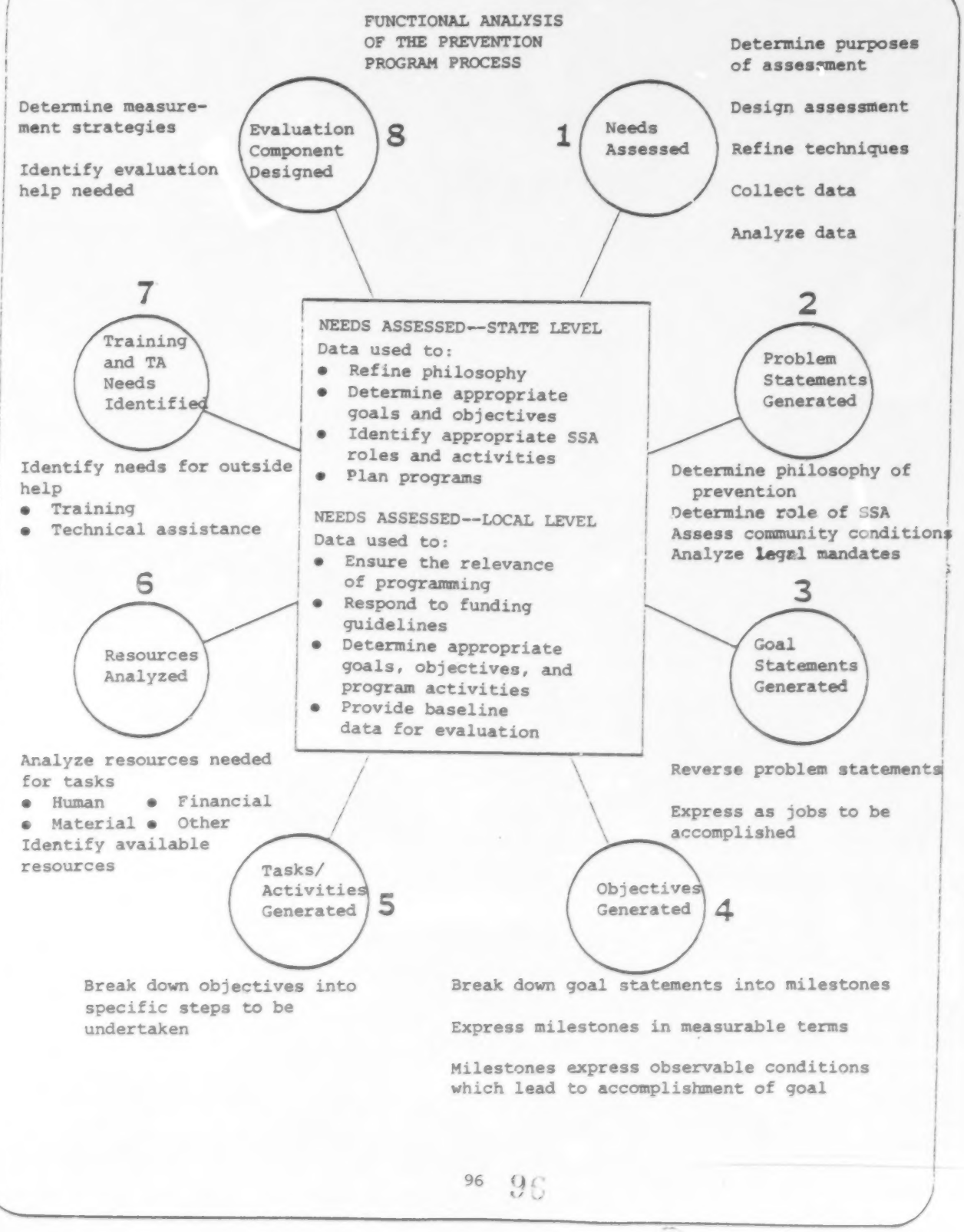
Your trainer will give you instructions for checking the specificity and usefulness of your objectives.

"PLANNING AHEAD"

	GOALS	OBJECTIVES	RESOURCES AVAILABLE	RESOURCES NEEDED	ASSUMPTIONS
1-year	1.				
	2.				
	3.				
3-years	1.				
	2.				
	3.				
5-years	1.				
	2.				
	3.				

NEEDS ASSESMENT PROCESS


Decision is made to conduct a needs assessment study
Define the purpose of the needs assessment
Define the resources available for the needs assessment
Identify data requirements
obtain SSA approval
Identify desired reports and analyses
Select a data collection technique
-- Key Informant
-- Community Survey
-- Demographic Analysis
-- Inferential Indicators
-- Program Data
obtain SSA approval
Organize the effort
Develop workplan and budget
obtain SSA approval
Collect Data
Analyze Data
Develop material, reports and briefing packages
Convert data into format useful to planners


FUNCTIONAL ANALYSIS OF THE PREVENTION PROGRAM PROCESS
1 Needs Assessed
Determine purposes of assessment
Design assessment
Refine techniques
Collect data
Analyze data
2 Problem Statements Generated
Determine philosophy of prevention
Determine role of SSA
Assess community conditions
Analyze legal mandates
3 Goal Statements Generated
Reverse problem statements
Express as jobs to be accomplished
4 Objectives Generated
Break down goal statements into milestones
Express milestones in measurable terms
Milestones express observable conditions which lead to accomplishment of goal
5 Tasks/ Activities Generated
Break down objectives into specific steps to be undertaken
6 Resources Analyzed
Analyze resources needed for tasks
• Human • Financial
• Material • Other
Identify available resources
7 Training and TA Needs Identified
Identify needs for outside help
• Training
• Technical assistance
8 Evaluation Component Designed
Determine measurement strategies
Identify evaluation help needed
NEEDS ASSESSED--STATE LEVEL
Data used to:
• Refine philosophy
• Determine appropriate goals and objectives
• Identify appropriate SSA roles and activities
• Plan programs
NEEDS ASSESSED--LOCAL LEVEL
Data used to:
• Ensure the relevance of programming
• Respond to funding guidelines
• Determine appropriate goals, objectives, and program activities
• Provide baseline data for evaluation

CONDUCTING A COMMUNITY ASSESSMENT

By

William H. Wheeler, Ph.D.

This article is reprinted, with permission, from A Handbook Designed to Assist Counselors from a Cultural Perspective, developed under contract with the Florida Drug Abuse Prevention and Education Trust, Washington, D.C., A.L. Nellum & Associates, September, 1977.

CONDUCTING A COMMUNITY ASSESSMENT

NEEDS ASSESSMENT

In the Evaluation Theory section of this manual we presented the "Evaluation Cycle". That cycle is one model that can be used to guide most programs in the development of their evaluation strategies. We refer to the cycle at this time to focus our attention on its second component - CONDUCTING A NEEDS ASSESSMENT. This section of the manual will deal expressly with that topic. Much of the content covered is based on material adapted from:

1. Warheit, Bell and Schwab, "Planning for Change: Needs Assessment Approaches," 1974.

2. Hargreaves, Attkisson, Siegal, McIntyre and Sorensen, "Resource Materials for Community Mental Health Program Evaluation, Part II - Needs Assessment and Planning," 1974.

3. From the University of Denver, "Analysis and Synthesis of Needs Assessment Research in the Field of Human Services," 1974.

4. From recent research conducted by Don Cahalan and Associates in Analyzing our National Drinking Practices.

<u>A Definition</u> (Warheit, Bell and Schwab, 1974, p. 4)

"A needs assessment program is a research and planning activity designed to determine a community's.....health services, needs and utilization patterns."

(University of Denver 1974, p. 3)

A needs assessment also determines the extent and type of dysfunction that certain individuals or groups experience in a community.

Once determined, services can be developed to improve the level of functioning for those people.

When conducting an assessment, we must first develop a tool that will measure the problem and then use the information collected to provide needed services.

SOME USES OF A NEEDS ASSESSMENT
(International Encyclopedia of the Social Sciences, Gruenberg 1968, Morris 1957)

1. Knowledge regarding time-period comparisons or trends. This information helps to distinguish problem areas that are increasing from those that for the present time seem to be stabilizing, and finally those that are diminishing.

2. Community estimates of the size, location and distribution of conditions aid in planning programs for the community and in identifying possible points of intervention.

3. From accumulated records of the ages at which individuals contract a problem, individual risks can be estimated and high priority target populations for preventative or treatment services may be identified.

4. Knowledge of the attributes of cases not in treatment enlarges the clinical picture by making our concept of a disorder less dependent on the clinician's limited perspective on cases.

5. Occasionally, new problems may be identified.

6. The working of services can be studied in terms of their success and failure, their selection of cases for treatment and the effects on the people they seek to serve.

7. In the search for causes of disorders, data on the factors associated with the distribution of a disorder supplement laboratory and clinical data in clarifying the causes of (alcohol related problems).

(Warheit, et. al. 1974, p. 12)

8. Provides data for the development/modification of agency based programs...

9. Provides management information data for administrative purposes.

10. A "Penetration Rate" can be established:

$$= \frac{\text{Number of different clients identified by alcohol services}}{\text{Number of individuals assessed to need services}}$$

This measures adequacy of performance.

THE IMPETUS BEHIND NEEDS ASSESSMENTS RESEARCH
(University of Denver 1974, pp. 4-6)

1. Social planning and resource allocation should be responsive to the problems and needs of the population.

2. These needs should be ascertained through an objective process. (They should not be just a reflection of what service providers see as needs.)

3. Changing governmental and organizational policies and procedures are demanding assessments for further funding and support.

WHEN SHOULD YOU DO A NEEDS ASSESSMENT?
(Hargreaves, et.al., 1974 p. 11)

1. The most advantageous time...to undertake an assessment program is in the very early stages of program development. This assists in:

    a. defining goals
    b. developing a program plan
    c. selecting program activities
    d. evaluating these activities to see that proposed interventions correspond with the needs

2. Assessment should be considered when programs are thinking about modifying current programs or adding new services.

3. During times of rapid social change within a service area. For example, changes created by major population shifts, major economic changes or natural disasters.

STATE OF THE ART
(Hargreaves, et.al., 1974 p. 19)

1. Technology in the area of social service research is in the state of infancy.

2. Methodological difficulties:

    a. Lack of reliability of measuring instruments.
    b. Problems associated with data collection.
    c. Lack of uniformity in classification of health problems. For example, when is a person an "alcoholic"?

(Parker G. Marden, 1974, p. 2)

3. In a review of 1973 proposals that had been funded by N. N.I.A.A.A., Marden found that 43% of the 385 studied lacked any estimate of the number of problem drinkers and/or alcoholic persons. An additional 18% provided an estimate, but did not say what it was based upon. The remaining 38% listed a method which was generally a simple statement of a proportion of the population being alcoholic. (These figures are usually based on percents developed by Jellinek.) This review points to the reality that many estimations of needs in the field of alcohol abuse are mere hunches or guesses based upon experience or subjective analysis, or are gross estimates that tend to be impressions of local needs.

4. Hargreaves observes that while assessment data may be imperfect, it is better than no data at all.

PLANNING THE ASSESSMENT PROGRAM
(Warheit, et.al., 1974 pp. 16-18)

The first step to take after making a commitment to do a needs assessment is to appoint a steering committee. Its membership should consist of administrative, clinical, board and citizen representatives. This broad based participation increases the likelihood of a successful project.

Once the committee is formed, a project director should be named. That person will be responsible for supervising the entire project.

Once established, the steering committee and project director must first deal with tasks related to the *definition, conceptualization,* and *operationalization* of the objectives of the program. Regardless of the type of assessment project being considered, a series of questions needs to be asked. The following list is typical.

1. What do we want/need to know?
2. Why do we want to know it?
3. How will the information be used once it is obtained?
4. Where can we find the data necessary to answer our research questions?
5. How can we obtain this data?
6. What useful data sources already exist at the local, state and federal levels?

7. How can we most advantageously compile, analyze and present the data?

8. Should any other agencies in the community be involved in the program? Why? Why not? How?

9. What will the program cost?

10. How long will it take to complete?

11. Where can we find the financial and personnel resources necessary to conduct the program?

12. Which of the available needs assessment programs will be most efficient for our purposes?

13. What are the relative advantages and disadvantages of each of these programs?

14. How much assistance will be necessary from special consultants? Where can we find them?

15. What techniques and processes are available whereby the findings can be translated into programs designed to meet human needs?

In response to question number six, we have included a list of possible sources of secondary data (i.e. data that has already been collected and is on record somewhere).

BEFORE YOU SPEND YOUR OWN MONEY
(Hargreaves, et.al., 1974 pp. 12-15)

A local (alcohol) program should undertake a thorough preliminary search to identify information collection efforts and data analysis already completed in its community and their usefulness and availability to the local program. Using existing data can save time and money when compared to "starting from scratch."

Possible sources of information and assistance include: (secondary data)

1. <u>Federations of Social and/or Health Agencies</u>

   These organizations may compile health indices such as various mortality rates or incidence and prevalence rates for a certain disease.

2. City Planning Departments

These departments have detailed information of data by census tracts as well as other descriptive information about communities. Some may also have population projection studies which may be useful for long-range program planning.

3. Health Departments

Health departments have disease surveillance units.

4. Mental Health Associations

They may help in locating appropriate indicators and identifying (alcohol program) practitioners in the area. They also have some sense of state and local mental health policies.

5. Comprehensive Health Planning Agencies

Under law, these agencies (according to Hargreaves) have been required to identify medically "underserved" populations.

6. Universities

Universities may be currently involved in relevant community studies. Sociology and political science departments should be of the most assistance. Staff may also be used as consultants. In addition, student help may be available.

7. Funding Agencies

They may serve as consultants and may have suggestions on the location and usefulness of specific indicators.

8. Clearing Houses

N.I.M.H. supports three clearing houses:

a. The National Clearing House for Mental Health Information
b. The National Clearing House for Drug Abuse Information
c. The National Clearing House for Alcohol Information

All of these provide free computer literature searches in their areas of specialization as well as a broad information dissemination program.

THE AGENCY OVERVIEW

In most instances, agencies interested in doing needs assessment studies will have been established for some time prior to the initiation of the project. With this in mind, the next step in the design strategy will be to gather information about the agency itself.

THE AGENCY ACTIVITIES CHECKLIST
(Adapted from Warheit, Bell and Schwab, 1974 pp. 22-23)

The following list can serve as a guide to those conducting the agency baseline study. It is not intended to be exhaustive but rather suggestive of the kinds of activities which are extremely helpful in preparation for the anticipated utilization of the needs assessment finding.

1. It will be necessary to summarize the formal objectives of the agency.

2. An outline of the legal mandates, regulations and community expectations which govern or strongly influence the agency's activities should be prepared.

3. A brief listing of the programs currently underway in the agency will need to be compiled.

4. A list of the program staff and a brief summary of their relationships to the services being provided should be prepared. A table of organization or PERT chart may be helpful here.

5. A brief review of the operating budget of the agency will need to be made. A listing of the sources of support and budget allocations for the various programs will also be helpful.

6. A list of the clients seen by the agency over the past year or two should be compiled. (A random sample from each of the major services may be adequate for the purposes of this review.) An analysis of the age, sex, race, ethnicity, income, geographic distribution and other sociodemographic characteristics of the clients is relevant and necessary.

7. A cataloging of the presenting problems and types of treatment or assistance provided the clients should be completed.

8. An enumeration of the various sources of referral to and from the agency should be prepared.

9. It will be helpful to summarize the relationships the agency has to other human service agencies in the community.

10. It is important to note any trends or changes in the agency's life which appear significant.

THE COMMUNITY OVERVIEW

Once the baseline study of the agency's goals, programs, client characteristics and community relationships has been completed, the next step in the process is to do a descriptive overview of the community served by the agency.

THE COMMUNITIES ACTIVITIES CHECKLIST
(Adapted from Warheit, Bell and Schwab, 1974 p. 25)

The following list can serve as a guide for those conducting the community baseline study. It is not exhaustive; neither is it inflexible. Consequently, some committees may want to add or delete specific activities.

1. The first step is to summarize the objectives of the study.

2. Next, it is necessary to identify the data sources available and note their format. (See list on page 156.)

3. The next step is to obtain the sociodemographic data needed, e.g., age, race, sex, ethnicity, income, education, occupation, etc.

4. After these data are collected they can be plotted on a map of the community.

5. It will be important to obtain data on other human service agencies in the community. The comprehensiveness of this list and the services provided will be determined by the objectives of the project.

6. The final step is to prepare a summary statement for use by the committee.

These processes and decisions must be completed before the data collection begins. Selecting the needs assessment approach is the next phase of the project.

NEEDS ASSESSMENT METHODOLOGIES AND DATA SOURCES

1. Secondary data analysis. (This includes the "social indicators approach" and estimation formulas.)

2. Community forums.

3. Workshops using the Delbecq Nominal Group Process.

4. The community impressions approach. (Encompasses "Key Informant" and "Convergent Analysis".)

5. The Delphi Technique.

6. Surveys of service recipients.

7. Interview with service providers. (Includes identification of existing resources and "rates under treatment".)

8. Surveys of community views on problems and services provided. (See Appendix R)

9. Prevalence and incidence studies.

These methods can be used alone, but should be used with at least one other means listed to gain reliability of data.

DEFINITIONS OF PRIMARY AND SECONDARY DATA COLLECTION

Primary Methods - Methods that seek information in its original form, i.e., information that has not been collected or stored previously.

Secondary Methods - Use information that has already been collected or data that has already been analyzed dealing with particular items of interest to a program.

Many of the techniques to be discussed will combine both types of data sources. There are advantages and disadvantages to each method:

PRIMARY TECHNIQUES

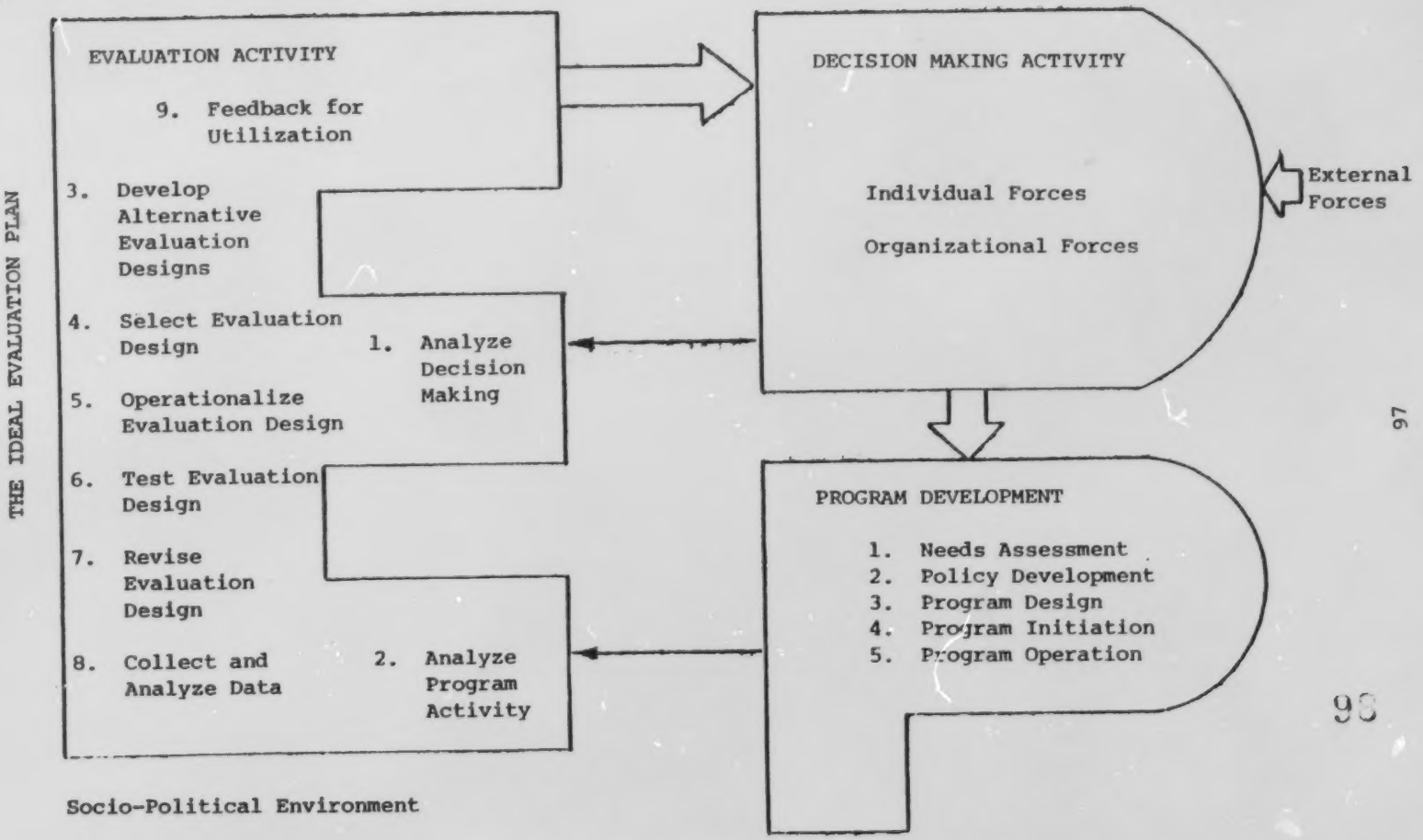
Advantages

1. Can provide the most current, reliable and valid information.

2. Can identify multi-problem individuals.

FIGURE

MODULE V: MANAGEMENT TOOLS -3



Reprinted from the National Prevention Evaluation Guidelines, National Institute on Drug Abuse, August 1979.

3. Can provide information on the extent to which individuals having problems utilize services.

4. Can identify new information not available in existing records.

Disadvantages

1. Surveys can be complicated and expensive.

2. Surveys require well trained personnel. They should be knowledgeable in:

    a. Constructing valid instruments
    b. Sampling techniques
    c. Training interviewers
    d. Data analysis

3. Training issues:

    a. Interviews are costly and time consuming
    b. While volunteers could be used, they may create scheduling, training and coordination problems.

4. If you use mailed questionnaires, they are subject to:

    a. Low response rate
    b. Inaccurate and incomplete reporting

5. It is often difficult to distinguish between needs, desires, wants and demands of respondents.

6. Questions to consider before doing a survey:

    a. Data collection costs?
    b. Data availability?
    c. Potential accuracy?
    d. Potential usefulness?

SECONDARY TECHNIQUES

Advantages

1. Are usually quick and inexpensive.

2. Require fewer resources for collection than primary techniques (i.e. staff time and travel).

3. In-house staff can gather the data without additional training.

Disadvantages

1. Data may not be stored in the form an agency wishes to retrieve it.

2. The data may be inaccurate, incomplete and outdated.

3. Access to the data may be hindered by confidentiality restrictions.

SECONDARY DATA ANALYSIS
(The Social Indicators Approach, Warheit, et.al., 1974, pp. 47-61)

The social indicators approach is based primarily on inferences of need drawn generally from descriptive statistics found in public records and reports. The underlying assumption of the approach is that it is possible to make useful estimates of needs and social well-being of those in the community by analyzing statistics on selected factors which have been found to be highly correlated with persons in need. Some commonly used indicators:

1. Special arrangements of the community's people and institutions;

2. Sociodemographic characteristics of the population such as age, sex, race, income;

3. The social behavior and well-being of people, particularly as it relates to crime, substance abuse, family patterns and morbidity and mortality rates;

4. The general social condition within which people live, e.g., substandard housing, overcrowding, accessibility to services and economic conditions.

Data needed for alcoholism agencies may include:

1. Population characteristics

2. Mortality and morbidity rates

3. Crime patterns and arrest records

Most studies of this type use existing area units such as census tracts or block groupings. (See pages 162-163 for technique used to identify high risk census tracks.)

MENTAL HEALTH NEEDS INDICATORS:

RANK ORDER BY CENSUS TRACT CITY OF SUPERIOR AND BALANCE OF DOUGLAS COUNTY

CENSUS TRACT	0201	0202	0203	0204	0205	0206	0207	0208	0209	0210	0301	0302	0303
VARIABLE	RANK												
1. Female head of household	1	3	2	11	6	4	7	10	5	8	9	10	9
2. Isolation	3	2	5	10	7	4	12	11	6	9	1	13	8
3. Crowding	1	11	6	7	13	12	2	5	4	3	9	10	8
4. Per cent of males	5	1	12	10	7	11	9	8	13	6	4	3	2
5. Per cent of females	9	13	2	4	7	3	3	5	6	2	8	10	12
6. Per cent of people under 5	1	10	7	8	9	6	4	4	5	2	3	2	8
7. Per cent of people over 65	6	1	3	8	11	4	9	12	5	10	7	13	2
8. Per cent divorced	2	1	3	11	11	4	8	10	6	7	9	7	5
9. Fertility rate	1	11	4	13	12	10	6	7	5	8	3	9	2
10. Per cent in group quarters	1	10	3	6	1	9	8	5	7	10	4	2	7
11. Transience	3	1	8	12	2	4	11	5	7	11	10	9	6
12. Per cent families below poverty level	2	1	3	13	12	6	11	9	8	10	5	7	4
13. Per cent males over 16 not in labor force	1	2	4	10	11	9	5	12	3	13	6	7	8

CENSUS TRACT	0201	0202	0203	0204	0205	0206	0207	0208	0209	0210	0301	0302	0303
VARIABLE	RANK												
14. Per cent non-owner occupied housing	2	1	4	12	5	3	6	11	8	7	9	10	13
15. Per cent males not in professional, technical or kindred occupations	8	1	11	12	13	9	10	4	7	2	6	5	3
16. Per cent service workers	1	2	3	12	9	4	7	6	8	10	6	5	13
17. Per cent unemployed	1	2	6	9	8	7	6	11	5	10	7	4	3
18. Per cent families receiving public assistance	2	1	5	7	11	7	10	12	9	4	3	8	6
19. Per cent families below poverty level with female head	2	1	4	12	11	3	7	9	8	10	6	4	5
TOTALS	52*	75	95	187									

* Represents the highest risk census track (high probability of social disorder).

Common sources of data:

1. Reports provided by the U.S. Bureau of Census
2. Reports of national, regional, state and local health, education and welfare agencies
3. Crime statistics
4. Court records
5. Bureaus of vital statistics
6. Health planning councils
7. Also see page

Advantages

1. The data is already collected.
2. Data can be secured at low cost by persons with a limited amount of research training.
3. The data is flexible, i.e., it can be compared to other communities. Also, data can be derived from several sources to be used in a single index of need.
4. Data can be used for future needs assessments.

Disadvantages

1. Some of the indicators may not be valid measures of need or problem areas.
2. Analyzing social indicators may require sophisticated, computer-based, statistical techniques.

ESTIMATION FORMULAS

The use of estimation formulas is one popular approach used to determine the number of alcoholics and/or problem drinkers in a given population. These formulas rely on data from mortality and morbidity rates and on data from citizen surveys.

We will present five methods:

1. Schmit and deLint (1970), uses data on the number of deaths attributable to cirrhosis of the liver.

$$A = \frac{PcDc}{Rc} \times 10{,}000$$

A = Number of alcoholics
Dc = Number of cirrhosis deaths
Pc = Percent of cirrhosis deaths attributable to alcoholism (.37)
Rc = Death rate due to cirrhosis per 10,000 alcoholics (16.5)

2. Schmit and deLint (1970), also uses data on suicides in a given year.

$$A = \frac{DsPs}{Rs} \times 10{,}000$$

A = Number of alcoholics
Ds = Number of suicides in a year
Ps = Proportion of alcoholics among suicides (.25)
Rs = Death rate due to suicide per 10,000 alcoholics (12.39)

3. The Parker G. Marden formula is based on national surveys conducted by Cahalan, Cisin, Crissley and Room. (See appendix P)

4. A comparison of a local geographic region to the nation.

$$\frac{X}{\text{1970 Geographic Region Total Population}} = \frac{\text{9 million (a 1970 estimate) alcoholics}}{\text{1970 United States population}}$$

X = Number of alcoholics in your geographic region.

5. This method is based on work done by Keller (1975). He estimated that 5.2% of all drinkers (age 15+) are alcoholic and another 5.2% are pre-alcoholic.

Problem drinkers = Percent of drinking population 15 and over X 10.4%
= .70 (Population 15+) X .104

Based on national data, it is estimated that 70% of the people 15 and over drink. (Alcohol & Health, 1971)

Methods 1, 2 and 4 measure "alcoholics" and should be multiplied by two to include "problem drinkers." This suggestion is based on research reported by Keller in 1975. He estimated that for every alcoholic there is ancther pre-alcoholic person whose drinking is causing problems for him/her. (Keller, 1975, p. 1446)

COMMUNITY FORUMS

(Hargreaves, 1974, pp. 64-77)

Any person living or working in a community is likely to have consciously or unconsciously developed some idea about the drug service needs of that community.

Each person associated with a community is "an expert" on some of the sociological and psychological aspects of that community.

Although no two people may have the same view, by pulling these views together one starts to develop a viable picture of the drug service needs in a community.

A *community forum* is one way to tap these views.

Definition:

A community forum is an open meeting for all members of a designated community. Its purpose is to give all members of the community an opportunity to air their views on or feelings about a particular issue -- in this case alcohol problems.

Advantages

1. Quick and cheap

    a. Planning done in a few weeks
    b. Meeting takes a few hours
    c. Costs include:

        1. Time of staff in planning, implementing and analyzing the forum
        2. Renting the hall
        3. Recording secretary
        4. Necessary transportation
        5. Child care services

2. Forum organizers can identify those most interested in doing something about unmet needs.

Disadvantages

1. Even with a good turnout, not everyone will have a chance to speak, so relevant input is lost.

2. Not all members of the community will attend, so results are not conclusive.

3. Discussion does not normally go beyond problem identification, so causes are not dealt with.

4. A forum may falsely raise expectations. If outcomes are unrealistic, results may be poor thus resulting in "we've been studied and questioned to death and nothing ever happens."

A forum is good for getting impressions and feelings, but not good for collecting facts and figures.

Points to Remember to Improve Forums:

1. Get diverse representation to make results more credible.

2. Wide publicity and inducement of groups to assure their attendance.

    a. Use more than one media.
    b. Make statements clear and simple and include: place, date, time, purpose, organizers and leaders.
    c. Publicize some several weeks before forum and more extensively one week and one day before.

3. Consult with knowledgeable community people for best place and time to hold the meeting.

4. Have a community member chair the meeting.

5. Limit speaking time to 3 minutes to avoid those who will dominate or those who speak on unrelated subjects.

6. Follow-up on the forum

    a. Prepare a list of attenders and thank them via mail.
    b. Tell them the immediate outcomes of the forum.
    c. Identify people who will work.

THE NOMINAL GROUP APPROACH DELBECQ TECHNIQUE
(Delbecq & Von de Ven, 1971)

This is a group workshop technique designed to increase the creativity and effectiveness of group idea generation.

The Process:

1. Pose a question or several questions to a group and then have each member of the group write down his/her answers during a silent period (10-15 minutes).

    a. The question may ask for possible solutions to a problem or ideas about a situation.
    b. Identify needs for service.

2. All ideas are shared with the group.

3. Each participant offers an idea from his/her list; these ideas are listed on newsprint and when ideas are exhausted the print is hung up on walls for all to see. *No comments or discussion at this time.

4. After round robin discussion is opened to define ideas, add new ones, eliminate some, or combine similar ones. (Ideas are read one at a time and discussion is asked for.)

5. The group chooses those ideas considered most important. Each person ranks 5 or 10 ideas they think important, the "votes" are tallied and a final list is arrived at.

6. There are five phases to this process:

    a. Problem Exploration
    b. Knowledge Exploration (deals with solutions)
    c. Priority Development (determined by administrators and resource controllers)
    d. Program Development
    e. Program Evaluation

    The Nominal group process is used at each phase.

Advantages

1. Avoids the following pitfalls of interacting (forum) group which are:

    a. The interacting group does not call for an abundance of new ideas.

b. Certain personalities tend to dominate, i.e. those in leadership positions or of high status.
c. Energy is wasted competing for the floor rather than listening to ideas of others.
d. Minority views are not heard.
e. New and innovative ideas tend to be discouraged.
f. Conversation falls in ruts and often disgresses from the main point.
g. Time is wasted and in the end, decisions are made hastily.

2. The silent period allows thinking time to produce ideas.

3. All group members participate.

4. Encourages minority ideas.

5. Avoids hidden agendas.

6. Everyone has to contribute.

7. Facilitates creativity.

8. Allows for airing personal concerns.

9. Does not allow any one person to dominate.

Disadvantages

1. Lack of some precision:

   Votes or rankings are made without thorough or careful sorting out of all the ideas generated into appropriate categories.

2. Some participants may feel manipulated in such a highly structured process.

COMMUNITY IMPRESSIONS APPROACH
(Encompasses "Key Informant" and "Convergent Analysis")

This is a method of collecting and combining existing data which gives clues about service needs with impressions about such needs from key individuals living or working in the community and then verifying the information gathered with those groups in the community identified as having the greatest needs.

Three major steps:

1. Once the community under study has been identified, interviews are conducted with ten or fifteen individuals who either work or live in the community. Individuals are selected on the basis of the longevity of their involvement with the community and/or the nature of their involvement with the community. Thus, a public health nurse, members of community action agencies, long time residents, a policeman or fireman, the local health officer and others are interviewed in order to elicit their impressions.

   The interviews are conducted with the aid of a list of questions about the existing alcohol services in the community and certain demographic characteristics of the population and *with a map* of the community under study. Answers to these questions are recorded on the map to provide a picture of the community from a service and demographic point of view. With the completion of the interviews, the impressions are collapsed into one map. Any discrepancies are erred in favor of a group having unmet needs (i.e. if one interview identified a group as having many alcohol related problems, and another interview identified that same group as having few, the group should be recorded at this time as having many -- this will be verified with the group under question at a later date).

2. Existing data which may provide clues about the mental health needs in the community are collected.

   Once this is collected, this "hard data" should be added to the map of impressions from the interviews.

3. A community forum is planned and held for each group or section of the community identified as having significant unmet mental health needs.

<u>The Purpose</u>

1. Validates identified needs.

2. Explores the nature and cause of those needs.

3. Involves those in need in the process of reducing need.

<u>Advantages</u>

1. The approach is inexpensive in terms of time and resources.

2. Combines both factual and impressionistic clues about service needs.

3. Those identified as having unmet needs actually have a chance to voice their views.

Disadvantages

The approach can be question in terms of reliability and validity. There is no way to insure that every group with service needs will be identified, nor that all the needs of those identified will have been recorded.

THE DELPHI TECHNIQUE

Definition

"...a carefully designed program of sequential individual interrogations (best conducted by questionnaires) interspersed with information and opinions feedback..."

The Process

Typically the Delphi uses four questionnaires.

1. The respondents provide some input into the topic under discussion.

2. Respondents are asked to rate items on the first round.

3. Based on averages from the second round the respondent is asked to move toward group judgement or state the reason why he/she refuses.

4. The final questionnaire provides new consensus data, a summary of the minority opinions and requests for final revision.

Advantages

1. Delphi collects and organizes judgements in a systematic fashion.

2. It solicits a wide range of input.

3. It establishes priorities.

4. It builds consensus.

5. It organizes dissent.

6. It allows anonymity of responses which may encourage creativity.

Disadvantages

1. It is based primarily on subjective impressions and should be supplemented with objective data.

2. Questionnaire construction is difficult in terms of validity and reliability.

3. The pull toward consensus may sacrifice accuracy.

4. The process may be too time consuming.

SURVEYS OF SERVICE RECIPIENTS
(University of Denver, 1974 p.23)

Definition

A service population survey differs from a general population survey in that it seeks data only from individuals who are, or have been, in the service system.

1. It provides a picture of the service population and their problems.

2. It provides a first hand account of the barriers to service.

3. It provides a measure of program effectiveness through recipient satisfaction questions.

4. It can identify the type of service desired but not available.

Problems

The data collected can not be generalized. The problems or needs of the nonservice population may be different from the service population.

SURVEYS OF ALCOHOL AGENCIES AND SERVICE PROVIDERS
(University of Denver, 1970, pp.24-25)

Definitions

This type of survey analyzes the patterns of service utilization and the impressions of administrators and practitioners as to high priority problem areas.

1. Needs are identified by demands for service.

2. Data is provided on service needs not widely recognized or socially acceptable.

3. Service providers are a valid source of information on existing community resources.

Problems

1. Agencies may not be providing services to the highest risk population.

2. Problems identified by service providers may reflect cultural or class biases.

3. Practitioners may be most experienced with and therefore have a vested interest in the services they provide.

4. Under-utilization may not reflect low priority, but instead may be a product of poor publicity and/or temporal or cultural barriers.

The following areas are of particular interest to a survey of agencies and service providers: (Hargreaves, 1974, p.52)

1. Referrals (demand)

    a. number
    b. source
    c. reasons (symptoms, problem areas)
    d. other characteristics

2. Accepted for service

    a. number
    b. diagnosis
    c. socio-demographic characteristics of clients -- who is refused service and reasons for refusal

3. Waiting list

    a. number
    b. source
    c. reasons (symptoms)
    d. other characteristics -- average time on waiting list

4. Service provided

    a. desirable services -- that organization would like to provide

b. actual services given

5. Referrals out of the agency

INFORMATION ON AVAILABLE RESOURCES
(Hargreaves, 1974, pp.53-54)

1. Range of services provided.

2. Client entry policies: conditions of eligibility for service; including available demographic descriptions such as age, sex, financial criteria, geographic restrictions and particular target population.

3. Staff characteristics: who provides services, their training, treatment modalities used, number of staff, average client load per staff member.

4. Financial characteristic:

   a. charge for services -- fee schedule, eligible for third part reimbursement, sliding scale provision

   b. agency support -- public or private, fees as percentage of total support

5. Accessibility:

   a. location of facility

      - convenient to target populations
      - convenient to public transporation

   b. referral procedure

      - is it cumbersome
      - well publicized
      - hours open for service
      - comfort, acceptability of facility
      - provision for child care when appropriate

6. Program inter-relationship

STANLEY ROBIN'S PROCEDURE FOR INCREASING RETURNS FROM MAILED QUESTIONNAIRES FROM AGENCIES
(Hargreaves, 1974, p.92)

Two of five contacts with the potential respondent

1. The first contact is a pre-questionnaire letter sent to the respondents containing the following elements:

    a. Request for the individual to participate in the research
    b. Its importance and possible applications
    c. Information that he/she will shortly receive a questionnaire
    d. Assurance of anonymity and confidential handling of information

    When possible, write the letter on a letterhead, co-signed by someone representing legitimate authority and validating the importance of the research and the appropriateness of the subject's participation.

2. A cover letter and the questionnaire.

3. Follow-up, strategies, i.e. telephone calls, reminders, thank you's, etc.

Examples of questions to ask:

1. Kinds of alcohol problems encountered?

2. Number of clients (estimate) with drinking problems?

3. Demographic characteristics of clients?

4. How do they handle problems? i.e. Do they refer? If so, where?

5. What problems do they have in making referrals?

    a. transportation
    b. financial
    c. temporal and cultural barriers
    d. unacceptable treatment staff
    e. poorly motivated clients
    f. lack of appropriate service

6. Type of alcohol service that would be most helpful.

7. Feedback results in the thank you note.

More specific questions can be asked within each category.

SURVEYS OF COMMUNITY VIEWS ON PROBLEMS AND SERVICES PROVIDED

Many programs either ignore community views or consider advisory boards adequate. These boards are often little more than window dressing or rubber stamps and only react to planning decisions already made. Also, membership on these boards may not reflect the needs of the entire community.

This type of survey would include a random sample of people living within a geographically defined service area. The sample could be stratified by census tracts, race, age or economic status. It may cover certain high risk groups such as the 20 to 24 year olds or those living in the lower socioeconomic areas.

Examples of information asked for: (Hargreaves, 1974, pp.57-58)

1. General community problems viewed as most important.
2. Sources for help for particular problems.
3. Problems thought most important.
4. Attitudes toward alcohol programs.
5. Alcohol programs thought most important.
6. Alcohol problems experienced in their own families.
7. Was help received for these problems? If not, why?
8. What services have been received and an indication of satisfaction?

Advantages

1. Surveys of the community provide information available through no other source.
2. Data is based on service as well as non service population.
3. When well constructed instruments are used, this approach provides the most valid and reliable data available.

Disadvantages

1. The technique is usually more expensive and time consuming then others.

2. Some individuals are reluctant to supply information about themselves or other family members.

3. A high refusal or non return rate may invalidate the results.

4. Questionnaire construction may be fraught with validity and reliability problems.

Specific advantages and disadvantages of mail, telephone and personal interviews are discussed in the follow-up section of this manual, pages 224-8.

(For an easy to read explanation of basic sampling techniques, see Warheit, et.al., 1974, pp. 78-113)

ACTIVITIES CHECKLIST TO DEVELOP A STEP-BY-STEP NEEDS ASSESSMENT (Warheit, 1974, pp.77-78)

1. The committee will need to begin by describing carefully the overall objectives of the study. On the basis of these objectives it will develop the concepts appropriate to the inquiry and operationalize these goals and concepts by preparing a design-methods outline to guide them throughout each stage of the process. As a part of this process, the committee will want to examine closely the questions on page 155, which are designed to assist those engaged in planning of the assessment program. The committee will also want to study the chapters detailing methods and procedures. Many very important items are included in this section and their careful consideration will be useful in helping to decide which survey can be used most effectively and how it can be conducted.

2. The population to be studied needs to be "identified" and an appropriate sample prepared.

3. The items for the questionnaire/schedule will need to be decided upon; their format and design will also need to be determined in the light of the objectives of the study, the unit for analysis and anticipated methods of analysis and presentation.

4. Interviewers will need to be recruited and trained or, in the case of a mailed questionnaire, letters will need to be prepared for mailing.

5. An extensive program of publicity should be commenced just prior to the initiation of the survey.

6. Appropriate agencies in the community which can "legitimate" the study should be contacted and appraised of the program. It is often important to inform law enforcement agencies, chambers of commerce, medical societies and other community groups that a survey is being conducted since they are sometimes called by citizens who have been selected as respondents/informants in the survey.

7. A system for coding, punching and analyzing the data will need to be decided upon and put into effect during the survey.

8. Once the data are gathered, they must be analyzed for presentation.

9. The findings need to be presented along with a list of recommendations for action. These recommendations are more effective when they are listed in a rank order based on their priority. A time-cost estimate should accompany the list of recommendations.

PREVALENCE AND INCIDENCE STUDIES

Definition

This is a study that seeks to identify rates or levels of certain disorders by means of a general population survey.

Prevalence is the number of cases present at one point in time in a defined population, divided by the number of persons in that population at that point in time.

Incidence is the number of new cases arising during a unit of time in a defined population, divided by the number of persons in that population at that point in time.

This technique has all the advantages of other primary approaches (see page 159). The disadvantages, however, should be emphasized again.

1. Such studies are extremely complicated and costly.

2. They require extensive research and statistical knowledge.

3. Basic definitions are not yet established. For example, who is a problem drinker and who is an alcoholic?

EXTENT AND PATTERNS OF USE AND ABUSE OF ALCOHOL
(Don Cahalan and Associates, 1964, 1967, 1969, 1975)

Given their caveats, we will not be emphasizing the survey type of needs assessment technique in this workshop. We will, however, review the most complete study of its kind that has been done to date on the subject of the extent and patterns of use and abuse of alcohol. That research was carried out by the social research group of the George Washington University. The final analysis of these surveys are now being completed at the School of Public Health, the University of California, Berkeley.

Findings published to date are drawn from three surveys. (*Alcohol and Health*, HEW, 1971, Chapter 2)

Survey I

A 1964 - 1965 study, published in "American Drinking Practices", measured drinking practices and attitudes among 2,746 persons representing the adult household population (age 21+) of the contiguous United States

Two additional surveys measured and anlyzed the prevalence of various types of alcohol related problems among adults:

Survey II

A 1967 follow-up of the first survey studied a subsample of 1,359 adult men and women (age 21+). Reported in "Problem Drinkers" 1970.

Survey III

A 1969 survey studied a subsample of men age 21 to 59. Reported in "Problem Drinking Among American Men", 1974.

This research is *not* directed toward detection of the characteristics of those who may be suffering from the "disease" of alcoholism.

Problem drinking is defined as the repetitive use of beverage alcohol causing physical, psychological or social harm to the drinker and others. (Plaut, 1967, pp. 37-38)

There are three principle objectives:

1. To study the range of drinking practices as they exist in the whole society.

2. To analyze many correlates of drinking behavior such as demographic variables, personality characteristics and attitudes and to carry out short term measures of change in drinking behavior.

3. To lay the groundwork and to serve as a baseline for future studies of a longitudinal nature, in which the same individuals are being followed-up over a period of years in order to measure changes in their drinking over time.

Survey IV

Begun in 1975 and scheduled for completion in 1978. This survey will be a subsample of the previous surveys and is intended to measure any changes in drinking over time.

SAMPLE DESIGN
(Cahalan, 1969, pp.225-228)

The sample was designed to give each person 21 years or older, living in a household within the United States (exclusive of Alaska and Hawaii), an equal representation in the final results. The sampling procedures conformed to established principles of probability sampling at all stages of the process; in the selection of the areas for interviewing, the selection of households and the selection of individuals to be interviewed within each selected household.

The entire contiguous United States was divided and subdivided into areas equivalent to census enumeration districts. From these subareas, households were randomly selected to be included in the survey. Then one person over 21 was selected from each household. In the first survey (1964-1965) 2,746 were interviewed. In the second survey (1967) 1,359 were reinterviewed. In the 1969 survey a total sample of 1,561 (men age 21-59 only) were interviewed.

DATA COLLECTION

1. All interviewers were personally trained and supervised. They were non-abstainers and except in a few instances they were all men.

2. Interviews were completed at a rate close to 90% by using repeated visits, letters and telephone calls.

3. All interviewers had detailed instructions and each completed interview was rechecked for any errors.

NATIONAL SURVEY I (1964-1965)

There were 2,746 interviews completed all over the United States. The questionnaire was designed to cover eight major categories:

1. Estimates of the amount of drinking within various subgroups (e.g., sex, age, socioeconomic status, region, size of town, race, national origin, religion);

2. Drinking of specific beverages: wine, beer or spirits;

3. Circumstances related to drinking: usual recreational activities, places where people drink and weekend as opposed to weekday drinking;

4. Retrospective reports of changes in amount of drinking: when respondent started to drink; whether he ever drank more or less than at present, and for what presumed reasons;

5. Drinking effects and problems: self-perception of one's own drinking; effects of drinking experienced during the previous year; whether others had tried to get respondent to drink more or less during the previous year;

6. Opinions about drinking: good and bad things that can be said about drinking; acquaintance with drinkers believed to have problems;

7. Correlation of personality attributes with drinking behavior, including analysis of such attributes as the respondent's general outlook on his own fortunes and values, activities he may have engaged in to relieve depression or nervousness, scores on seven brief personality scales (e.g., neuroticism, alienation, religious fundamentalism);

8. Characteristics of persons who drink to escape from personal problems, in comparison to others who drink only for presumably social reasons.

Based upon answers to questions on the survey schedule, respondents were given a problem score. There were eleven problem areas covered.

In general, Cahalan, et.al. categorized drinking-related problems

into three broad areas:

1. The amount, patterning and style of drinking behavior.

2. The psychological loading of the respondent attaches to the behavior.

3. The physiological and social consequences of the behavior.

The specific areas measured:

1. Drinking behavior:

    a. heavy intake (frequent intoxication)
    b. binge drinking
    c. symptomatic drinking

2. Psychological involvement:

    a. psychological dependence on drinking or
    b. loss of control over drinking

3. Consequences of drinking:

    a. belligerance after drinking
    b. problems with spouse or relatives
    c. friend and neighbor problems
    d. job problems
    e. problems with police, law or accidents
    f. health problems and injuries
    g. financial problems

Three views of alcoholism:

1. Vice - emphasizes the drinking behavior

2. Disease - emphasizes the condition of the individual drinkers

3. Social problems - emphasizes the individual's relation with his/her social and cultural environment

(See Appendix P, pages 31-32 for the definitions of these problems.)

THE PROBLEM SCORE

A person is considered a "problem drinker" if he/she scores 7 or more points from the list of 11 problem areas.

6 points = a severe problem

3 points = a moderate problem

1 point = a mild problem

The score of 7+ is equivalent to:

1. Having problems in two or more areas with at least one problem scored as "severe".

2. Having problems in three or more areas with at least two problems "moderate" or more severe.

3. Having problems in five or more areas with at least one problem "moderate" or more severe.

4. Have at least slight problems in seven or more areas.

Respondents were also classified into an "Index of Social Position". A variant of the Hollingshead Index of Social Position was used in this survey as the principal index of socio-economic status... The index (ISP) takes into account the respondent's education, the occupation of the family breadwinner, and the status or power position associated with the occupation.

Another issue was one of measuring alcoholic beverage consumption and classifying people according to the amount they drink.

The national survey built upon the earlier types of quantity-frequency analysis and upon an expanded system, first used in the California study by Knupfer, based on 12 questions that took into account the quantity of alcohol per occasion, the frequency or number of occasions, and the variability or fluctuations in time and amount, as follows: The quantity of a beverage consumed at a sitting (this was measured separately for wine, beer and spirits by asking how often the person had as many as five or six, or three or four, or one or two drinks); the frequency with which each of the three types of beverage was usually drunk; the variability of drinking, as shown by a combination of the modal (most usual) amount consumed and the highest amount drunk at least occasionally. Thus, the drinking index used in the national survey might be called, instead of a Q-F index, a Q-F-V index (for quantity, frequency and variability).

The method used in making these three types of measurement was as follows:

Respondents were first handed a small, four-page, multicolored booklet as the interviewer made the statement, "The next few

questions ask you about your own use of various types of drinks. Will you please take this booklet and on the first page put a check mark next to the answer that tells how often you usually have wine...Now please turn to the green page and do the same for beer... Now please turn to the pink page and do the same for drinks containing whiskey or liquor, including scotch, bourbon, gin, vodka, rum, etc....And now turn to the yellow page and please check how often you have any kind of drink containing alcohol, whether it is wine, beer, whiskey or any other drink."

On the booklet, wine was further defined as "(or a punch containing wine)"; and drinks containing whiskey or liquor were further defined as "(such as martinis, manhattans, highballs, or straight drinks)."

The frequency scale for each beverage, printed in the booklet to be checked by respondents, was as follows: "Three or more times a day; Two times a day; Once a day; Nearly every day; Three or four times a week; Once or twice a week; Two or three times a month; About once a month; Less than once a month but at least once a year; Less than once a year; I have never had wine (beer, drinks containing whiskey or liquor, any kind of beverage containing alcohol)."

The rationale for a scale so heavily loaded with responses indicating very frequent drinking was to give the respondent the impression that no matter how frequently s/he drank, there must be many others who drank even more frequently than s/he -- thus possibly reducing any reluctance to check a category indicating frequent drinking.

For each of the three types of beverages, three questions measuring quantity and variability were then asked in series:

1. "Think of all the times you have had...recently. When you drink..., how often do you have as many as five or six?"

2. "When you drink..., how often do you have three or four?"

3. "When you drink..., how often do you have one or two?"

Quantity was expressed in terms of "glasses" of wine, "glasses" or "cans" of beer, and "drinks" of beverages containing spirits. The response categories were: "Nearly every time"; "More than half the time"; "Less than half the time"; "Once in a while"; and "Never."

These questions on quantity consumed and relative frequency were asked for each beverage which the respondent reported drinking about once a month or more often. The replies permitted classification of each respondent by modal quantity for each beverage

CHART 1.—*Quantity–Variability Classifications*

Quantity–Variability Class	*Modal Quantity (amount drunk "nearly every time" or "more than half the time")*	*Maximum Quantity (highest quantity drunk)*
1	5–6	5–6
2	3–4	5–6 "less than ½ time"
3	3–4	5–6 "once in a while"
4	no mode specified	5–6 "less than ½ time"
5	3–4	3–4
6	1–2	5–6 "less than ½ time"
7	no mode specified	5–6 "once in a while"
8	1–2	5–6 "once in a while"
9	1–2	3–4 "less than ½ time"
10	1–2	3–4 "once in a while"
11	1–2	1–2

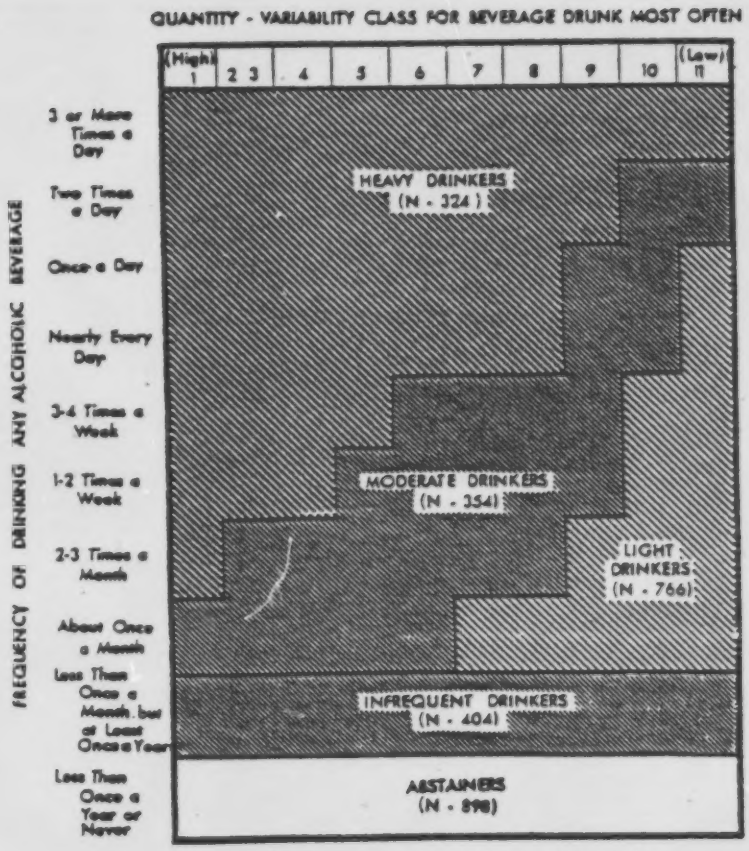
CHART 2.—*Q–F–V Classifications*

Q–F–V Group	*Frequency (of any alcoholic beverage)*	*Quantity–Variability Class (beverage drunk most often)**
1. *Heavy Drinkers* (324 persons, 12% of weighted* total)		
	a. Three or more times a day	1–11
	b. Twice a day	1–9
	c. Every day or nearly every day	1–8
	d. Three or four times a week	1–5
	e. Once or twice a week	1–4
	f. Two or three times a month	1
2. *Moderate Drinkers* (354 persons, 13%)		
	a. Twice a day	10–11
	b. Every day or nearly every day	9–10
	c. Three or four times a week	6–9
	d. Once or twice a week	5–9
	e. Two or three times a month	2–8
	f. About once a month	1–6
3. *Light Drinkers* (766 persons, 28%)		
	a. Every day or nearly every day	11
	b. One to four times a week	10–11
	c. Two or three times a month	9–11
	d. About once a month	7–11

4. *Infrequent Drinkers*
(404 persons, 15%): Drank less than once a month but at least once a year (quantity questions not asked).

5. *Abstainers*
(868 persons, 32%): Drank none of the three beverages as often as once a year (quantity questions not asked).

CHART 3

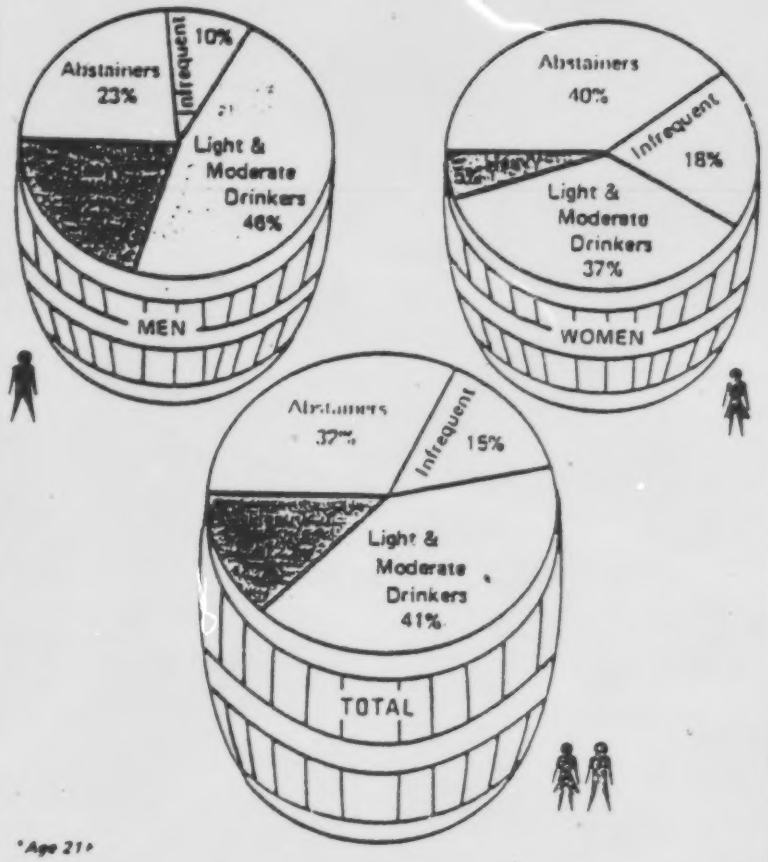


Quantity–Frequency–Variability Classifications

32% of the total adult population are abstainers. The remaining 68% drink at least once a year, with 12% of all adults classified as heavy drinkers.

77% of adult men and 60% of adult women drink at least once a year, with 21% of all men and 5% of all women classified as heavy drinkers.

FIGURE 1. PERCENT OF ABSTAINERS AND TYPES OF DRINKERS AMONG ADULTS* U.S.A. 1964-1965



**Age 21+*

** Degree of drinking was classified according to a rather complex combination of the quantity of alcohol consumed per occasion and the frequency of drinking.*

- *Heavy drinking. Drink nearly every day with five or more per occasion at least once in a while, or about once weekly with usually five or more per occasion.*
- *Moderate drinking. Drink at least once a month, typically several times, but usually with no more than three or four drinks per occasion.*
- *Light Drinking. Drink at least once a month, but typically only one or two drinks on a single occasion.*
- *Infrequent Drinking. Drink at least once a year, but less than once a month.*
- *Abstainers. Drink less than once a year or not at all.*

NOTE: These are just some of the conclusions described in the book "American Drinking Practices". Many other variables were also analyzed and explained. We will refer you to the book for a more complete review. The purpose of including the above information in this manual was to emphasize the detail involved in the study.

(i.e., the quantity he drank "nearly every time" or "more than half the time") and by the maximum quantity he drank at least "once in a while." Thus a person who said that when he had beer he had one or two glasses or cans more than half the time, but once in a while drank five or more, would be classified as having a modal quantity of one or two and a maximum of five or more.

This two-way approach permitted the quantity-variability classification for each beverage shown in Charts 1, 2, and 3.

NATIONAL SURVEY II

This survey was based upon a subsample of the 1964-1965 study and it included 1,359 reinterviews. Changes were measured covering the three year span of time. Current problem scores were tabulated and correlated with social-psychological scores and demographic variables.

Six social-psychological variables:

1. Attitude toward drinking
2. Environmental support for heavy drinking
3. Impulsiveness and nonconformity
4. Alienation and maladjustment
5. Unfavorable expectations
6. Looseness of social controls

Demographic variables:

1. Age
2. Sex
3. Socioeconomic status (ISP)
4. Urbanization

From these variables, a "risk score" was developed, with "risk" referring to the danger of being a problem drinker. Analysis shows that the social-psychological "risk score" does a fairly effective job of predicting problem drinking -- especially when combined with such independent variables such as those listed above. (See Cahalan, et.al., 1970, p.106.)

NATIONAL SURVEY III

This survey, completed in 1969, reports on a "high risk" group of American men ages 21-59. This group of men constitutes a majority of the working population and holds a large share of economic and political power. There were 978 men interviewed who were not included in the first two national surveys. They were combined with 583 men between ages of 21-59, taken from the second national survey. This sample totaled to 1,561 men age 21-59. (See Cahalan and Room, 1974.)

NATIONAL SURVEY IV

The final stage of national research will be reported on within the next couple of years. It will reinterview subjects from the previous surveys and will permit a more detailed analysis of changes in drinking behavior and problems over a ten year period.

CONCLUSION

The Cahalan research was included in the manual to provide a basis for introducing the Parker G. Marden estimation formula. (See Appendix P) Marden's work is tied directly to the national surveys and will be the primary needs assessment tool discussed in this training workshop.

BIBLIOGRAPHY

Bailey, M.B., "Epidemiological Studies and Control Programs in Alcoholism, VI. Some Issues in Epidemiological Surveys of Alcholism." *American Journal of Public Health*, LVII, pp. 987-991, 1967.

Bailey, Margaret B., Haberman, Paul W. and Alksne, Harold, "The Epidemiology of Alcoholism in an Urban Residential Area." *Quarterly Journal of Studies on Alcohol*. Vol. 26, 1965.

Bailey, M.B., Haberman, P.W. and Sheinber, T., "Identifying Alcholics in Population Surveys: Report on Reliability", *Quarterly Journal of Studies on Alcohol*. Vol. 27, 1966.

Blane, H.T., Overton, W.F. and Chafetz, M.E., "Social Factors in the Diagnosis of Alcholics: Characteristics of the Patient," *Quarterly Journal of Studies on Alcohol*, XXIV, pp. 640-663, 1963.

Cahalan, Don, *Problem Drinkers*, Jossey-Bass, Inc., Publishers, San Francisco, 1970.

Cahalan, Don and Cisin, I.H., "American Drinking Practices: Summary of Findings from a National Probability Sample: I. Extent of Drinking by Population Subgroups," *Quarterly Journal of Studies on Alcohol*, XXIX, pp. 130-151, 1968.

Cahalan, Don, Cisin, I.H. and Crossley, Helen M., *American Drinking Practices: A National Study of Drinking Behavior and Attitudes*, College and University Press, New Haven, Conn., 1969.

Cahalan, Don and Room, R., *Problem Drinking Among American Men*. Monograph of Rutgers Center of Alcohol Studies, No. 7. New Brunswick: Rutgers Center of Alcohol Studies, 1972.

Clark, Walter, "Operational Definitions of Drinking Problems and Associated Prevalence Rates," *Quarterly Journal of Studies on Alcohol*. Vol. 27, December 1966.

DeLint, J. and Schmidt, W., "The Distributicn of Alcohol Consumption in Ontario," *Quarterly Journal of Studies on Alcohol*, XIX, pp. 968-973, 1968.

Edwards, Griffith, "Epidemiology Applied to Alcoholism, A Review and an Examination of Purposes", *Quarterly Journal of Studies on Alcohol*. Vol. 34, pp. 22-56, 1973.

Gibbins, Robert J., M.A., "Alcoholism in Ontario: A Survey of an Ontario County." *Quarterly Journal of Studies in Alcohol.* Vol. 15, 1954.

Hargreaves, Wm. A., Attkisson, C. Clifford, Seigel, Larry M., McIntyre, Marguerite H. and Sorenson, James E., *Resource Materials for Community Mental Health Program Evaluation: Part II Needs Assessment and Planning,* National Institute of Mental Health, San Francisco, 1974.

Hollingshead, A.B. and Redlich, F.C., *Social Class and Mental Illness.* New York: John Wiley, 1958.

Hunt, W., "Relapse Rates After Treatment for Alcoholism." *Journal of Community Psychology,* I. pp. 66-68, 1973.

Jolliffe, N. and Jellinek, E.M., "Vitamin Deficiencies and Liver Cirrhosis in Alcoholics," *Quarterly Journal of Studies on Alcohol,* II, pp. 544-583, 1941.

Keller, M., "Problems of Epidemiology in Alcohol Problems". *Journal of Studies on Alcohol,* XXXVI, pp. 1442-1452, 1975.

Kittredge, Lee D., Franklin, Jack L., Thrasher, Jean H., *Estimating the Population in Need of Alcoholism Services, A New Approach,* Presented at Midwest Sociological Association Meeting, Omaha, Nebraska, 1974.

Knupfer, G., "The Epidemiology of Problem Drinking," *American Journal of Public Health,* 57, pp. 973-986, 1967.

Lipscomb, Wendell R. M.D., "Survey Measurements of the Prevalence of Alcoholism, A Review of Five Surveys", *Archives of General Psychiatry,* Vol. 15, pp. 455-461, November 1966.

Marden, Parker G., "A Procedure for Estimating the Potential Clientele of Alcoholism Service Programs." Prepared for Division of Special Treatment and Rehabilitiation Programs, National Institute on Alcohol Abuse and Alcoholism, Alcohol, Drug Abuse and Mental Health Administration, 5600 Fisher Lane, Rockville, MD 20852, 1974.

Mulford and Miller, "The Prevalence and Extent of Drinking in Iowa, 1961. A Replication and an Evaluation of Methods." *Quarterly Journal of Studies on Alcohol.* Vol. 24, 1963.

Mullins, Thomas and Paulsen, William, *Douglas County, Wisconsin, Incidence and Prevalence Alcohol Survey Study,* Superior, Wisconsin, April 1975.

Nguyen, Tuan D., Attkisson, C. Clifford, Bottino, Marilyn J., *Definition and Identification of Human Service Need In a Community Context*, Dept. of Psychiatry, University of California, San Francisco and the District V Mental Health Center, San Francisco. A paper presented at the National Conference on Needs Assessment in Health and Human Services, The University of Louisville, Louisville, Kentucky, March 9-12, 1976.

Plaut, T.F.A., *Alcohol Problems: A Report to the Nation*. New York: Oxford University Press, 1967.

Popham, Robert E., M.A., "The Jellinek Alcoholism Estimation Formula and Its Application to Canadian Data." *Quarterly Journal on Alcohol*. Vol. 17, No. 4, December 1956.

Popham, Robert E., "Indirect Methods of Alcoholism Prevalence - Estimation: A Critical Evaluation." *Alcohol & Alcoholism*. Toronto: University of Toronto Press: 1970.

Richardson, Elliot, Secretary of Health, Education and Welfare, "Alcohol and Health." National Institute of Alcohol Abuse and Alcoholics, December 1971.

Rutledge, C.C., Carroll, G.B. and Perkins, R.A., "A Socio-Epidemiological Study of Alcoholism in East Baton Rouge Parish," Baton Rouge: Louisiana Health and Social and Rehabilitative Services Administration, 1973.

Schmidt, Wolfgang, and DeLint, Jan., "Estimating the Prevalence of Alcoholism From Alcohol Consumption and Mortality Data." *Quarterly Journal of Studies on Alcohol*. Vol. 31, No. 4, December 1970.

Siegel, J.S., "Completeness of Coverage of the Non-white Population in the 1960 Census and Current Estimates and Some Implications," in *Social Statistics and the City*, edited by David Heer. Cambridge: Joint Center of Urban Studies, 1968.

Smith, James W., M.D., "The Diagnosis of Alcoholism" *Western Medicine Medical Journal*, Vol. 7, December 1966.

Warheit, George J., Bell, Roger A., Schwab, John J., *Planning for Change: Needs Assessment Approaches*, Unpublished, University of Florida, 1974.

Alcohol and Health, Dept. of Health, Education and Welfare Publication No. (ADM) 74-68, 1971.

Analysis and Synthesis of Needs Assessment Research in the Field of Human Services, Prepared by Center for Social Research and Development, Denver Research Institute, University of Denver.

Biennial Report of the Council on Drug Abuse, State of Wisconsin, Jan. 1973.

"Criteria for the Diagnosis of Alcoholism" Criteria Committee, National Council on Alcoholism, New York, New York, 1972.

"Report on Alcohol", American Businessmen Research Foundation, Spring, 1976, p. 14

Resource Materials for Community Mental Health Program Evaluation, Parts I and II, National Institute of Mental Health, San Francisco, 1974.

NATIONAL PREVENTION EVALUATION GUIDELINES

Reprinted from the National Prevention Evaluation Guidelines, National Institute on Drug Abuse, August, 1979.

CHAPTER 2: MODEL FOR EVALUATION

INTRODUCTION

NIDA's Prevention Branch has developed an evaluation research model that is applicable to any of the four drug abuse prevention modalities (information, education, alternatives, and early intervention) and any of the five primary targets (individuals, peers, families, the school, and other significant social institutions). The model, illustrated in Figure 2, features three levels of evaluation: process, outcome and impact.

Process evaluation refers to an assessment of a prevention program that includes identification of the client population, a description of the services delivered, the utilization of resources for the programs, and the qualifications and experiences of the personnel participating in them. Process evaluation attempts to capture in "still frame" the characteristics of an operational, ongoing prevention program.

Outcome evaluation is concerned with measuring the effect of a project on the people participating in it. This includes youths, parents and families, counselors, youth workers, teachers, and so on. Outcome evaluation attempts to answer the question: "What has this program produced relevant to the lifestyles, attitudes, and behaviors of those individuals it is attempting to reach?" In essence, outcome evaluation tries to determine if a prevention project has met its own objectives.

Impact evaluation explores the aggregate effect of prevention programs on the community as a whole. The community may be defined as a school system, county, city, state, region of the country, or the nation. The purpose of impact evaluation is to gauge the additive effects of numerous drug abuse prevention programs operating within a geographic boundary, or of an individual drug abuse prevention program running an extended period of time, say, five years.

The model presented in this chapter complements NIDA's prevention evaluative research model. It offers a conceptual framework for presenting evaluation issues, strategies, and methodologies throughout the Guidelines. It also serves to illustrate an "ideal" process by which prevention program evaluations may be conducted.

This model focuses on two kinds of issues pertinent to evaluation, those which (1) are necessary for effective evaluation of drug abuse prevention and other human service programs, and (2) reflect more broadly on the current thought regarding procedures and strategies that will enhance the quality of evaluation research.

Figure 2. DRUG ABUSE PREVENTION EVALUATIVE RESEARCH MODEL (Bukoski 1979)

TYPE OF EVALUATION	PROCESS →	OUTCOME →	IMPACT
LEVEL OF EVALUATION	PREVENTION PROGRAM EFFECTS		AGGREGATE OR CUMULATIVE EFFECTS AT THE COMMUNITY LEVEL
POTENTIAL INDICATORS OF EFFECTIVENESS	DESCRIPTION OF TARGET AUDIENCE/RECIPIENTS OF SERVICE PREVENTION SERVICES DELIVERED STAFF ACTIVITIES PLANNED/ PERFORMED FINANCING RESOURCES UTILIZED	CHANGES IN DRUG-RELATED: - PERCEPTIONS - ATTITUDES - KNOWLEDGE - ACTIONS: DRUG USE TRUANCY SCHOOL ACHIEVEMENT INVOLVEMENT IN COMMUNITY ACTIVITIES	CHANGES IN: - PREVALENCE AND INCIDENCE OF DRUG USE - DRUG-RELATED MORTALITY/ MORBIDITY - INSTITUTIONAL POLICY/ PROGRAMS - YOUTH/PARENT INVOLVEMENT IN COMMUNITY - ACCIDENT RATES
POTENTIAL PREVENTION EVALUATIVE APPROACHES	EXAMPLES: THE COOPER MODEL FOR PROCESS EVALUATION NIDA-CONSAD MODEL NIDA-COST ACCOUNTABILITY MODEL QUALITY ASSURANCE ASSESSMENT	EXAMPLES: EXPERIMENTAL PARADIGMS QUASI-EXPERIMENTAL DESIGNS IPSATIVE DESIGNS E.G., GOAL ATTAINMENT SCALING	EXAMPLES: EPIDEMIOLOGIC STUDIES INCIDENCE AND PREVALENCE STUDIES DRUG-RELATED SCHOOL SURVEYS COST-BENEFIT ANALYSIS

NEED FOR A MODEL

Numerous surveys of evaluations in human service areas, including drug abuse prevention, consistently find that:

- Few evaluations are performed in response to previously stated decision-making requirements.
- Most evaluations suffer from serious methodological deficiencies.
- Most evaluations focus on outcomes, with little or no information on program process or on impact within the community.

There are three concepts critical to the effectiveness of drug abuse prevention evaluations. First, the field of evaluation research has developed a wide range of methods and strategies, building on the many scientific disciplines that have contributed to the evaluation of human services, namely, psychology, sociology, anthropology, political science, statistics, operations research, and computer science. Evaluators working in the field of drug abuse prevention need to be aware of this body of knowledge and its appropriate application.

Second, evaluators need to know the strengths and weaknesses of various methodologies (designs, measures, data analysis techniques). This is essential to selecting appropriate methods and in utilizing findings.

Third, techniques exist which can enhance the likelihood that evaluation findings will be utilized. Evaluators need to be aware of these techniques and assume the responsibility for applying them.

In addition to these needs, there has been and remains pressure from many sources (taxpayers, Federal and State agencies, legislators) for more effective evaluation in all the human services. Drug abuse prevention, because of its recent emergence as a human service field, is especially in need of effective evaluation in order to demonstrate the importance of adequately funding programs and projects. In part because of this pressure, people in the field are especially receptive to efforts to improve the quality of evaluations.

The Guidelines addresses the above concepts, so important to the effectiveness of drug abuse prevention evaluations. One objective of the Guidelines is to provide a broad survey of evaluation technology so as to acquaint evaluators and their customers with the range of options available, and thus aid them in securing the required information efficiently and effectively. Another objective is to increase the ability of evaluators to recognize both the usefulness and limitations of their findings. The results of even the most sophisticated research are likely to have some limitations, which the user must be aware of in order to make reliable use of the information. Toward this end, the Guidelines will review the principal sources of bias in evaluation research, and indicate what are the best remedies and approaches for dealing with each type of bias. Where a critical bias has not been controlled for, or a significant systematic error weakens a result, the Guidelines will point out what limited use can be made of the flawed results.

With respect to utilization, the Guidelines takes the position that it is the evaluator's responsibility to increase the likelihood that new knowledge will be applied by decision makers. Evaluators must do what they can, within reason, to encourage their customers to use the results. Elsewhere in the Guidelines are detailed procedures for implementing evaluation findings.

The Guidelines model is not a logical theory of evaluation; it attempts rather to organize information concerning evaluation into a particular framework. This framework is designed to be sufficiently specific to guide evaluators in the conduct of effective and useful evaluations yet flexible enough to encourage incorporation of new developments in prevention programming and evaluation technology.

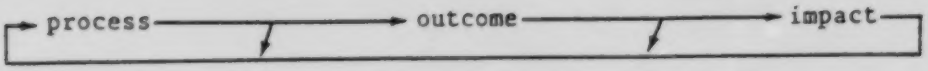
EVALUATION PARAMETERS

The Guidelines proposes three major parameters of evaluation. This organization is appropriate for evaluation regardless of the point at which formal evaluation activities are begun. The three parameters are: levels of program evaluation, type of evaluation information, and target area.

LEVELS OF PROGRAM EVALUATION

The levels of evaluation refer to the successive stages in the development of information in an ideal evaluation effort. This can be represented in the following systems diagram:

Figure 3. Evaluation Levels



Process Level

Process information reflects the inputs that go into a program, the patterns in which these inputs interact, and the transactions that take place within the program. Information such as participant and staff characteristics, physical plant characteristics, and financial resources, as well as the theory on which the program operates, needs assessment, policy development, and program design activities are all examples of program inputs. Information derived from the sociopolitical environment is also considered to be important evaluative information because of its potential contribution to subsequent evaluation and its use as a basis for record keeping systems. Other assessments on the process level may include a description of services rendered, the decision-making structure, patterns of interaction among participants and staff, and so on.

Outcome Level

Data gathered during this phase of program evaluation typically are addressed to specific program objectives concerned with change in participant behavior, attitudes, values, or knowledge. The major objectives in all prevention program modalities concern the reduction of inappropriate drug and alcohol use. At the

same time, different prevention programs have unique objectives relating to the particular theories underlying them. These include such diverse objectives as improvement of self-concept and responsibility, reduction of alienation, increase in achievement motivation, and improvement in a broad range of variables relating to school performance. And this list is far from exhaustive.

Impact Level

Information gathered in this phase relates to longer-term, generalized results of program operations. The manner in which impact data are relayed is a function of the community needs and problems which gave rise to the prevention program in the first place. That is why such broad issues as changes in incidence and prevalence in drug abuse and in community competence to deal with these problems are frequently addressed in impact evaluation. Such changes impinge directly on inputs to the program.

INFORMATION TYPE

The Guidelines identifies three types of evaluation information: descriptive, associative, and explanatory.

Descriptive data are the easiest to obtain and frequently can be taken from program records. However, program records often are inadequate. Therefore one of the first contributions of an evaluation effort to a program may be the development of a better record keeping system. But then, development of a management information system comprised of descriptive data categories is a perfectly legitimate byproduct of an evaluation.

Associative data relate variables thought to significantly effect program functioning without assigning causality. Obtaining associative data usually requires more elaborate evaluation design, more time, more cost, and more justification to management than obtaining descriptive data.

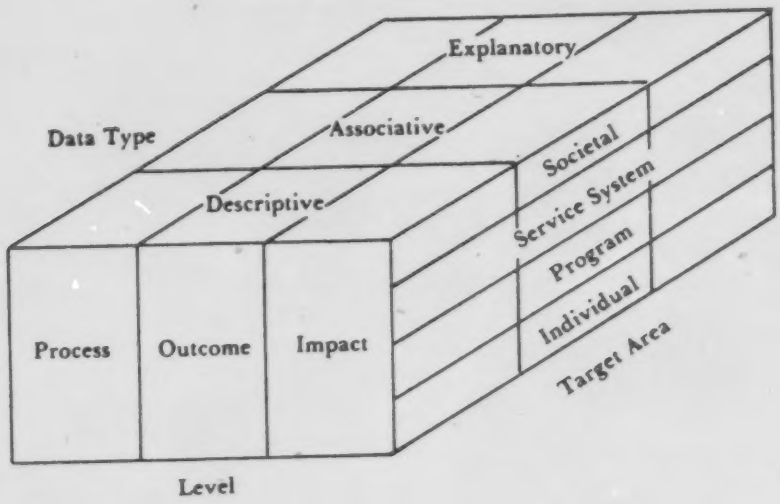
Explanatory data attempt to answer the question "why?" The rationale for development of this type of data requires still more sophisticated design, theory testing, and basic knowledge building than for associative data.

TARGET AREA

Maintaining a systems oriented focus, it is important to realize that evaluation can be directed at different targets or subsystems of the overall program. The level of focus can influence significantly the type of question asked. The most common targets of analysis are an individual, face to face group, program, service system area, and, finally, components of the general society. The well-publicized success or, more realistically, the failure of one individual in one program can have significant repercussions throughout the system and may influence policy at the societal level. Conversely, a decision at a high level can dramatically influence the behavior of individuals in local programs.

Figure 4, is a matrix of the parameters discussed on the preceding pages. It attempts to depict the possible interactions between, and combinations of, level, type of information, and target area of evaluation. The matrix is presented to illustrate that there is a potential for meaningful analysis within each cell. However, some cells are infrequently, if ever, found in evaluations. The choice of cells in any particular evaluation depends upon the needs of decision makers and the availability of resources.

Figure 4. Matrix of Evaluation Parameters



SYSTEMS CHANGE USING EVALUATION: PROGRAM DEVELOPMENT

Properly employed, evaluation ensures that program development will be a rational process, one based on the constant supply and assessment of feedback to programs. It follows that the maximum potential effectiveness of evaluation will be realized if evaluation has a role from the first stages of program development. But in reality, actual introduction of an evaluation into a program can occur anytime in a program's life, and the point at which it is introduced has implications for the type of feedback. For example, planning or initiating evaluation in the earliest phases of program development may encourage collection of data concerning activities that simply may not be recordable later.

Given the link between program development and evaluation, it is useful to examine five major phases of program development and the evaluation issues associated with each. The phases are listed below:

- Needs assessment
- Policy development
- Program design
- Program initiation
- Program operation.

The first three phases may be considered planning operations, whereas the last two are implementation activities. A similar classification will be used in the discussion of the process of evaluation. Each phase has associated with it a major issue for program evaluation that may not be explored or even understood if the evaluation is not introduced until sustained program operation is achieved. A brief discussion of these phases and their associated evaluation issues follows.

The needs assessment phase of program development is a planning activity which attempts to establish whether and to what extent certain previously defined problems and needs exist in a community and which subgroups are affected. The major issue for program evaluation at this point is one of external validity. That is, program ineffectiveness can result from incorrect assessment of the problem. Specifically, the evaluator must realize that no matter what program is eventually put into operation, it should have a valid needs assessment as its foundation.

The policy development phase establishes the goals and specific objectives for the local intervention or program area. The issue for evaluation here is one of construct validity. In this instance, either the causal theory may be inappropriate or it can be improperly translated into policy (that is, improper translation into independent or dependent variables). There may not have been, for instance, appropriate understanding and consideration given to certain community values and other critical factors in the socio-political environment.

The program design phase involves transforming policy into significant characteristics of the program (for example, the target population, personnel qualifications, intervention methods, and other program aspects). Again, evaluators must be aware of a construct validity issue. Program policy may be appropriate, but the program itself fail because of an improper translation of policy.

The program initiation phase calls for the translation of theory into action. It is then that the program is implemented. Many evaluation practitioners believe that it is in this phase that program evaluation data collection first takes place. In other words, there is a difference between the evaluation that takes place during needs assessment, that which takes place during policy development or analysis, and that which begins with the implementation of program activity. The focus of evaluation in the program initiation phase is on the identification of participants, resources, and constraints. The major issue for evaluation at this time is one of external validity. Program design may be appropriate, but the program still fail due to improper implementation of the design.

The program operations phase involves those critically important internal transactions which are a major focus of management information systems. The predominant issue for evaluation activity during this "process" phase is one of internal validity. Program implementation (initiation) may be appropriate, but the program may fail anyway because of faulty management (for example, high staff turnover and insufficient supervision).

The major issue for evaluation in relation to program results, both outcome and impact, is one of conclusion validity. Program operations may be appropriate, but failure still result from the influence of external factors. In addition, throughout all five phases of program development, statistical conclusion validity is an issue--it may lead to unclear or misinterpreted outcome or impact data.

EVALUATION PLAN

These Guidelines are based on the proposition that any assessment of program value must be made in the context of community need and alternative strategies for meeting those needs. The ideal evaluation activity is as responsive as possible to the socio-political environment surrounding the program activity, as well as to the needs of a broad range of decision makers.

The ideal evaluation plan[1] is seen as consisting of nine sets of activities, each of which builds on preceding activities. Feedback to decision makers and evaluators, and consequently utilization of results, can occur from any activity and

thereby provide for continuous modification of program and evaluation activities. (See Figure 5.)

The basic premise in the implementation of the evaluation plan is that chances for an effective and useful evaluation to occur are maximized when a skilled evaluator works in a cooperative fashion with an equally skilled program staff member. A collaboration of this sort stands to produce an evaluation plan that is sensitive to the heart of the program under study.

The evaluation activities are listed below in the order in which they normally occur:

1. Analysis of decision-making activities
2. Analysis of actual or intended program activities
3. Development of alternative evaluation designs
4. Initial selection of a design
5. Operationalization of the design
6. Field test of the evaluation plan or revisions of the plan
7. Revisions resulting from the field test
8. Collection and analysis of data
9. Utilization of information resulting from interpretation of collected and analyzed data.

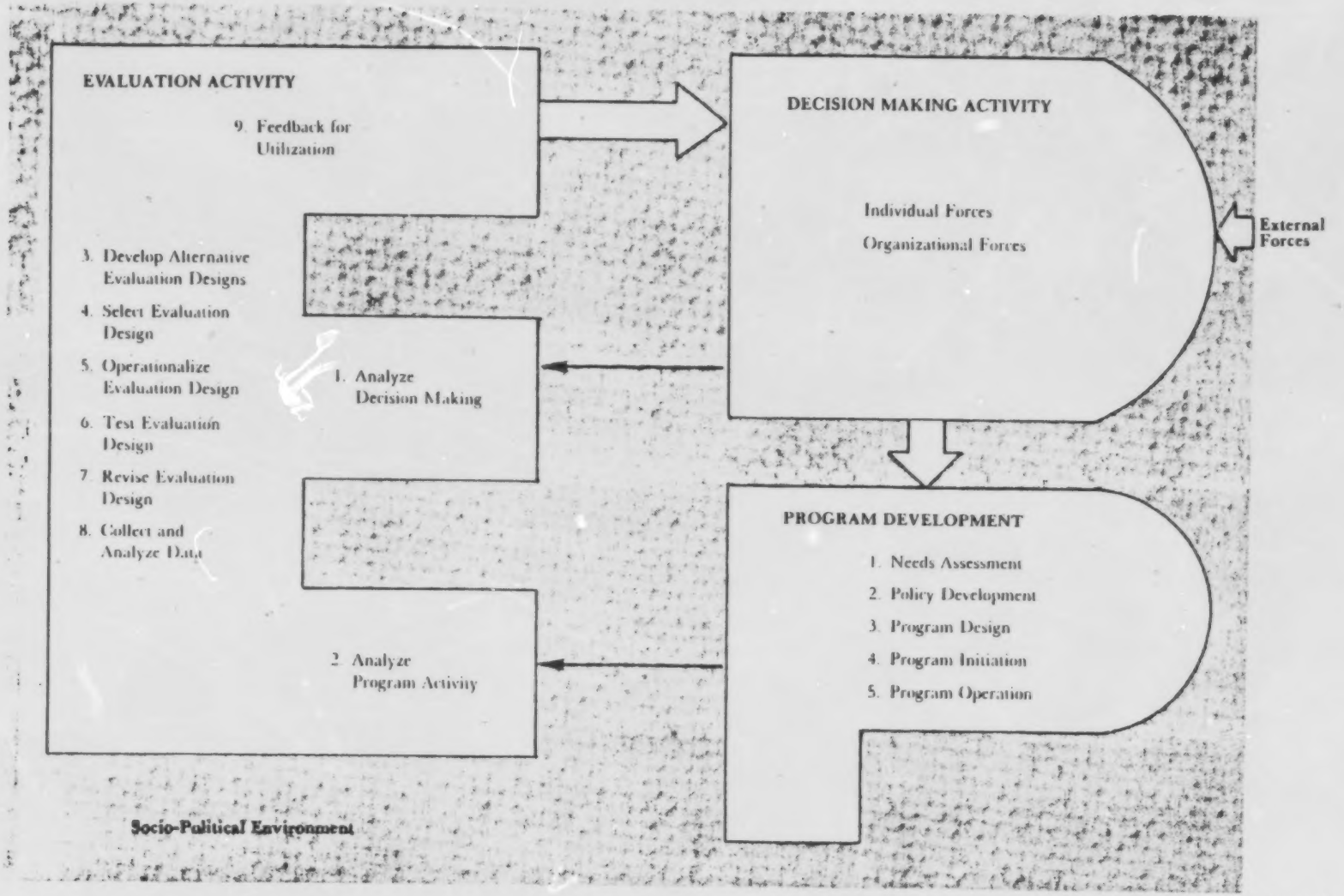
ANALYSIS OF DECISION-MAKING ACTIVITY

Ideally, the objectives or purposes of an evaluation will determine the type and amount of information to be collected and analyzed, as well as the appropriate uses that can be made of evaluation results. The NPERN model stresses that these objectives or purposes should be related to the needs of the users. Thus, the first step in the evaluation process is to identify the primary users and assess their needs, for example, their requirement for information relating to specific decision-making activities.

Next, the evaluator and the decision maker should specify the kinds of information or indicators that are relevant for the decision-making activity and the amount and detail of information that is necessary. It can be assumed that there will be a tendency to over-identify information "needs." Thus, the next component in this task is to differentiate information that is desirable from that which is essential. One way to do this is to assess the expected impact of the information, or its absence, on decision-making and program activites.

A final step involves determining the quality of data that will be acceptable to and used by the decision maker. Quality of data is controlled by the evaluation design, measurement procedures, and analytical procedures. The question is whether or not the decision maker will use information collected within a quasi-experimental design, using qualitative assessment techniques, or whether s/he will accept only data gathered within a true experimental design.

Figure 5. The (Ideal) Evaluation Plan



ANALYSIS OF PROGRAM ACTIVITY

An effective evaluation requires a program that has: (1) testable program assumptions, (2) clearly specified and measurable objectives, and (3) documented program strategies. Collaboration of program personnel and evaluators in the analysis of program activity substantially increases the possibility that the program will meet these requirements and that there will be a commitment to use the results.

The analysis of program activity, coupled with a study of decision making, provides the information needed by an evaluator to develop alternative designs. The analysis seeks to identify basic characteristics of the processes of the program, and its operating relationship to the ideals of planners, legislators, and others. Opinions and values may be challenged and revisions may be required.

The conceptual basis of the program should be clearly understood. This includes the assumptions or hypotheses on which the program is based and the rationale for the modalities in effect. The evaluator should know what the assumed dependent and independent variables are, and how the various program strategies are intended to effect the changes identified in the objectives.

Program objectives should be stated in terms of changes that are being sought; what degree, extent, or pattern of changes, in quantifiable terms, is being sought; how the changes will be measured or indicated; and the time frame in which the objectives are expected to be achieved.

The documentation of program processes or activities is important to the evaluator because of the implications they have for certain dimensions of evaluation. Program recruitment, referral, or intake procedures all shape the design to be used in a program evaluation. The manner in which services are delivered, let alone the objectives and the content of the service, can affect the type and timing of measurement and the unit to be measured, as well as the costs and quality of data. The development and the maintenance of a good record system is one way that a program can ready itself to contribute to effective evaluation. Design and establishment of a data base that provides an accurate picture of a program's inputs and processes should be one of the first steps taken in an evaluation effort. Such data are most useful in planning the evaluation.

DEVELOPMENT OF ALTERNATIVE EVALUATION DESIGNS

The preceding activities provide the information needed to design a feasible evaluation plan. Many texts on evaluation research stress the need for evaluation research to model itself along the lines of classical experimental designs. While such designs have an important role in outcome and impact evaluation, they are of limited use in process evaluations. Furthermore, there are alternative approaches to evaluation that may make important contributions to decision-making and may be more appropriate than the classical approach, given time and resource constraints or the dynamics of the program being considered.

Designing an evaluation requires that choices be made carefully among information options, which are themselves subject to time and resource constraints. Ideally, the evaluator should prepare several workable evaluation plans that will meet the identified needs of the decision maker. The plans will likely vary as to the following: type of information (explanatory, descriptive, associative); timing of measurements (including both frequencies and intervals); measurement techniques (interview/questionnaire, observation, archival); qualitative versus quantitative assessments; single versus multiple measures; and--obviously--who and what

is measured. At issue is the quantity and quality of information to be produced and the costs associated with each. Many drug abuse prevention projects are funded for less than $50,000 per year, and this must cover the cost of an evaluation as well as the expense of operations. A project of this scale usually can afford to spend at most $2,500 to $5,000 on an evaluation. However, such projects also may be able to contribute staff hours and time of the administrator. Despite financial limitations, evaluators should be able to assist such a project, perhaps by obtaining the bulk of the desired information from relatively simple descriptive statistics and using carefully chosen variables.

INITIAL SELECTION OF AN EVALUATION DESIGN

To enable the decision maker to make an informed choice among alternative plans, the evaluator should rank the plans according to criteria relating to the decision maker's needs identified in step one (for example, the level of confidence associated with each design, resources required, and other advantages and limitations). This process may result in changes in previously identified needs and considerations so that additional design development may be necessary. In effect, the development-selection processes may require several iterations until an initial, feasible evaluation plan is selected.

PUTTING THE EVALUATION DESIGN INTO AN OPERATING CONTEXT

Having selected an evaluation design, the evaluator and program personnel will "operationalize" the plan. Instruments need to be selected or developed, and design elements of sampling, data collection, data analysis, and utilization procedures specified and incorporated into a time frame. Appropriate roles for evaluators and program personnel are also spelled out.

One strategy for ensuring that an evaluation is intimately tied to project development and that the results are understood and utilized by decision makers working with the project, is to build an active role for project personnel in the evaluation. The role of project staff can vary greatly. They may conduct the actual evaluation, with occasional help from an outside consultant, or they may only provide research assistants to perform low-level tasks, with the major work being done by the outside evaluator.

The role of the evaluation consultant too may vary. In some cases it will correspond to that of the independent evaluator. Where the project staff assume a primary role in the evaluation process, the evaluator may function as a guide or resource person--s/he may introduce appropriate technical options and help with the design of the evaluation and the selection among alternatives. S/he may also provide training and technical assistance to enhance or complement the skills of the project evaluation staff.

FIELD TEST OF THE EVALUATION PLAN

All aspects of the evaluation plan should be pilot tested, including sampling, data collection and analysis, dissemination, and utilization. The pilot test should determine whether the data collection schedule is feasible, if the collection can be carried out with minimal disruption to program activities, if the data being collected are valid, whether the variables are reliably measured, if the costs of data collection and analysis are on target, and whether the resulting information is used as intended by the decision maker.

REVISE EVALUATION DESIGN

Following the field test, evaluators and program personnel should review the plan and its initial operation to determine what, if any, revisions should be made and what procedures should be followed to implement the full scale evaluation.

ROUTINE DATA COLLECTION AND ANALYSIS

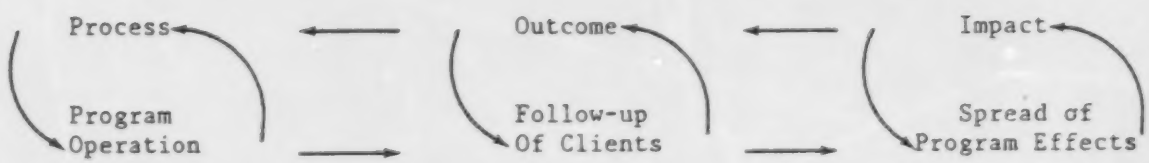
Implementation of the evaluation process on a full scale requires routinized data collection and analysis. As ideally envisioned in this model, data will be produced and interpreted in a scheduled series of oral and written reports, along with special reporting as required. It should be noted that during this stage of the evaluation process the preceding evaluation activities may be continued or repeated. This is a major feature of the incremental evaluation process--learning is open ended and no "step" is ever completed.

UTILIZATION

The evaluation cycle is completed with the feedback and utilization of results from routinized data collection and analysis. Utilization is the final test of any evaluation model. In most of the social services, the history of program evaluations is characterized by scant use in decision making at any level. The field of drug abuse prevention is no exception. Although no systematic analysis has been performed to explore the reasons for this failure, it is commonly assumed that a major cause relates to unmet expectations of the decision makers for whom the studies were intended. The evaluation model recommended in these "Guidelines"--a feedback system at its heart--stresses that the ultimate decision makers should be involved early on in the design of the evaluation, thereby ensuring that their expectations will be addressed, if not satisfied. Evaluations that provide periodic feedback in the form of reports that include quantitative data are especially well-suited for this purpose. In addition, the decision maker who helps design the data presentation will be more likely to accept data-based implications.

Feedback loops are one of the distinguishing features of evaluation. Therefore, the pattern and function of feedback loops should be designed or negotiated in advance. Figure 6 portrays a typical feedback loop system for different levels of evaluation.

Figure 6. Evaluation Feedback Loops



The assumption behind a feedback system planned to facilitate program improvement is that the elements and timing of the critical points in the loop should be predetermined to the extent possible. Furthermore, the potential implications of possible negative findings from alternative courses of action should be outlined.

Figure 7 illustrates a feedback loop system for selected elements of an evaluation in which client characteristics affect staff selection, and staff characteristics have implications for client recruiting. Staff inputs in turn will influence training practices, and so on down the line. Ultimately, all of these affect the program services which, upon observation and evaluation, may have implications for client recruitment, staff selection, and staff training.

If evaluation results are to be utilized, the organization for which the results are intended must have an internal climate that is receptive to new information. The evaluator therefore has the responsibility to try to develop a climate of receptivity within the receiving organization. This does not mean that the evaluator must be a full-fledged organizational developer capable of transforming an organization that is dead set against incorporating his/her work. It does mean that on a limited scale the evaluator is expected to look for ways of improving the climate for the utilization of the evaluation findings.

A multiplicity of organizational levels usually surround a particular prevention program, and should be taken into consideration when planning an evaluation. The model is intended to help the administrators and evaluators appreciate the variety of uses that can be made of the evaluation results if it is planned and designed properly. Modifications in design and activities may occur in subsequent cycles of the process, thus encouraging the use of the findings by decision makers at alternative levels.

DECISION-MAKING ACTIVITY

The evaluator must keep in mind that in addition to the evaluation results themselves, there are a host of other forces which affect decision making. Often these other factors are more influential than evaluation findings. They are the by-products of the socio-economic milieu in which decisions are made.

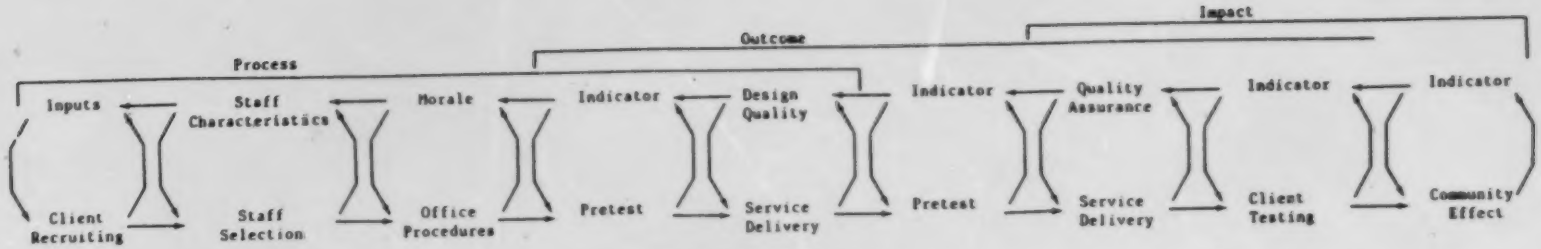
These forces can be categorized in terms of how they relate to the individual decision maker, and to influences inside and outside the organization. (Overlaps obviously exist between these categories.)

Individual forces. The personality and leadership style of decision makers have major impact on the way evaluation findings are accepted. His/her perception of how the organization will accept particular findings, his/her commitment to change both in a general sense and as regards the particular problems addressed by the evaluation, and the persuasiveness which the decision maker brings to the organization all affect an evaluation's potential to bring about change.

Organizational forces. Not only are the individual characteristics of the decision maker important but just as salient are the ways in which s/he is viewed by others within the organization. The perceived power and credibility of the decision maker, stemming from professional authority and personal prestige, will influence the extent to which evaluation findings will be accepted and implemented.

External forces. Extra-organizational forces--essentially those of the community and of funding sources--as well as the general belief system of the prevention field have powerful influences on the degree to which evaluation findings are

Figure 7. Process, Outcome, and Impact Feedback Loop Overlap



accepted. Community action can support or hinder program change; inaction on the part of the community reflects a lack of interest, a desire to maintain the status quo, or simply poor community organization directed at the problem area. Obviously, the relative importance of drug abuse prevention as a community issue will have a strong effect on how evaluation findings will be received and acted upon within both the community and the organization.

A full discussion of leadership styles and their effect on organizations may be found in Cartwright and Zander (1968), while a comprehensive discussion of the utilization of knowledge, including annotated bibliographies, may be found in Putting Knowledge to Use (Glaser and Davis 1976). The topic of utilizing evaluation findings and the role of the evaluator in this process is more fully discussed in Chapter 10.

CONCLUSION

The model presents a framework for improving the quality of evaluations. The nucleus of the model is program evolution--a continual search for alternative ways of achieving a specific objective, facilitated by a feedback or monitoring device, with mechanisms for correction. The likelihood of producing an effective and useful evaluation is increased when a skilled evaluator works cooperatively with an equally skilled prevention professional. Thus, prevention evaluation should be a multifaceted, incremental, and iterative process.

ENDNOTES

[1] This approach borrows heavily from: John D. Waller and John W. Scanlon. "The Urban Institute Plan for the Design of an Evaluation." Working paper 3-003-1. Washington, D.C.: The Urban Institute, March 1973. (Copies may be obtained from either author at the Performance Development Institute, 1800 M. St., N.W., Suite 1025-South, Washinton, D.C. 20036).

REFERENCES

Bukoski, W. Drug abuse prevention evaluation: A meta-evaluation process. A paper presented at the Annual Conference of the American Public Health Association, November 4-6, 1979, New York City, New York.

Cartwright, D., & Zander, A. (Eds.) Group dynamics: Research and theory. New York: Harper & Row, 1968.

Dornbusch, Sanford M., & Scott, W. Richard. Evaluation and exercise of authority. San Francisco: Jossey-Bass, 1975.

Glaser, E.M., & Davis, H.R. Putting knowledge to use: A distillation of the literature regarding knowledge transfer and change. Los Angeles: Human Interaction Research Institute, 1976.

WHERE POLITICS AND EVALUATION RESEARCH MEET

By

Carol H. Weiss

This article is reprinted, with permission, from Evaluation. Copyright (c) 1973, The Minneapolis Medical Research Foundation, Inc.

WHERE POLITICS AND EVALUATION RESEARCH MEET

Evaluation research is a rational enterprise. It examines the effects of policies and programs on their targets--whether individuals, groups, institutions, or communities--in terms of the goals they are meant to achieve. By objective and systematic methods, evaluation research assesses the extent to which goals are realized and looks at the factors that are associated with successful or unsuccessful outcomes. The assumption is that by providing "the facts," evaluation assists decision-makers to make wise choices among future courses of action. Careful and unbiased data on the consequences of programs should improve decision-making.

But evaluation is a rational enterprise that takes place in a political context. Political considerations intrude in three major ways, and the evaluator who fails to recognize their presence is in for a series of shocks and frustrations:

First, the policies and programs with which evaluation deals are the creatures of political decisions. They were proposed, defined, debated, enacted, and funded through political processes, and in implementation they remain subject to pressures--both supportive and hostile--that arise out of the play of politics.

Second, because evaluation is undertaken in order to feed into decision-making, its reports enter the political arena. There evaluative evidence of program outcomes has to compete for attention with other factors that carry weight in the political process.

Third, and perhaps least recognized, evaluation itself has a political stance. By its very nature, it makes implicit political statements about such issues as the problematic nature of some programs and the unchallengeability of others, the legitimacy of program goals and program strategies, the utility of strategies of incremental reform, and even the appropriate role of the social scientist in policy and program formation.

Knowing that political constraints and resistances exist is not a reason for abandoning evaluation research; rather it is a precondition for usable evaluation research. Only when the evaluator has insight into the interests and motivations of other actors in the system, into the roles that he himself is consciously or inadvertently playing, the obstacles and opportunities that impinge upon the evaluative effort, and the limitations and possibilities for putting results of evaluation to work--only with sensitivity to the politics of evaluation research--can the evaluator be as creative and strategically useful as he should be.

PROGRAMS ARE POLITICAL CREATURES

Evaluation research assesses the effects of social programs, which in recent years have increasingly been governmental programs and larger in scale and scope than the programs studied in earlier decades. There have been important evaluations of job training programs, compensatory education, mental health centers, community health services, Head Start and Follow Through,

community action, law enforcement, corrections, and other government interventions. Although there have been occasional studies of long-established traditional services, most evaluation efforts have been addressed to new programs; it is the program into which new money is being poured that tends to raise the most immediate questions about viability and continuation.

The programs with which the evaluator deals are not neutral, antiseptic, laboratory-type entities. They emerged from the rough and tumble of political support, opposition, and bargaining. Attached to them are the reputations of legislative sponsors, the careers of administrators, the jobs of program staff, and the expectations of clients. The support of these groups coalesces around the program, but the counterpressures that were activated during its development remain active and the program remains vulnerable to interference from legislatures, bureaucracies, interest groups, professional guilds, and the media. It is affected as well by interagency and intra-agency jockeying for advantage and influence.

The politics of program survival is an ancient and important art. Much of the literature on bureaucracy stresses the investment that individuals within an organization have in maintaining the organization's existence, influence, and empire. As Morton Halperin succinctly states:

> Organizational interests, then, are for many participants a dominant factor in determining the face of the issue which they see and the stand which they take....Organizations with missions strive to maintain or to improve their (1) autonomy, (2) organizational morale, (3) organizational 'essence,' and (4) roles and missions. Organizations with high-cost capabilities are also concerned with maintaining or increasing (5) budgets.

It is not only around evaluation that social scientists bemoan the political factors that distort what they see as rational behavior. Economist Julius Margolis recently noted:

> ...you may go through a scientific analysis to answer the question of where the airport should be located, but an altogether different decision may finally emerge from the bureaucracy.

Bureaucrats, or in our terms program administrators and operators, are not irrational; they have a different model of rationality in mind. They are concerned not just with today's progress in achieving program goals, but with building long-term support for the program. This may require attention to factors and to people that can be helpful in later events and future contests. Administrators also have to build and maintain the organization--recruit staff with needed qualifications, train them to the appropriate functions, arrange effective inter-staff relations and communications, keep people happy and working enthusiastically, and expand the influence and mission of the agency. There are budgetary interests, too, such as the need to maintain, increase, or maximize appropriations for agency functioning. Clients have to be attracted, a favorable public image developed, and a complex system managed and operated. Accomplishing the goals for which the program was set up is not unimportant, but it is not the only, the largest, or usually the most immediate of the concerns on the administrator's docket.

Particularly when an organization is newly formed to run new programs, its viability may be uncertain. If the organization is dealing with marginal clienteles, it can fall heir to the marginal repute of its clients, and it is likely to have relatively low public acceptance. Organizational vulnerability can become the dominant factor in determining what actions to take, and the need to build and maintain support can overwhelm the imperatives to achieve program goals.

In sum, social programs are the creatures of legislative politics and of bureaucratic politics. The model of the system that is most salient to program managers--and the components of the system with which they are concerned--are bound to be different from the model of the social scientist/ evaluator. A program manager's view is probably no less rational. In fact, evidence suggests that programs can and do survive evaluations that show dismal failure to achieve goals. These programs, however, are less likely to survive a hostile congressional committee, newspaper exposes, or withdrawal of the support of professional groups.

There have been occasional references in evaluation literature to the need to recognize organizational "system" objectives as well as program goals (as in work by Herbert Schulberg and Frank Baker), but the notion has never caught on. So evaluators continue to regard these concerns of program staff as diversions from their true mission, and give them no points on the scorecard for effectiveness in the politics of organizational survival.

The disparity in viewpoint between evaluation researchers and program managers has consequences for the kind of study that is done, how well it is done, and the reception it gets when it is completed. Obviously, the political sensitivities of program managers can dim their receptivity to any evaluation at all, and when a study is undertaken, can limit a program manager's cooperation on decisive issues of research design and data collection. Again, at the completion of the study, the program manager's political perspective will lessen the likelihood that he will view evaluative findings as conclusive or the need to act on them as imperative. Even rigorously documented evidence of outcomes may not outweigh all other interests and concerns.

More subtly, some political fall-out shapes the very definition of an evaluation study. As an example, let us look at the specification of program goals that become the evaluator's criteria for effectiveness. Because of the political processes of persuasion and negotiation that are required to get a program enacted, inflated promises are made in the guise of program goals. Public housing will not just provide decent living space; it will improve health, enhance marital stability, reduce crime, and lead to improved school performance.

Furthermore, the goals often lack the clarity and intellectual coherence that evaluation criteria should have. Rather than being clear, specific, and measurable, they are diffuse and sometimes inherently incompatible. Again, it is the need to develop coalition support that leaves its mark. Holders of diverse values and different interests have to be won over, and in the process a host of realistic and unrealistic goal commitments are made.

Given the consequent grandiosity and diffuseness of program goals, there tends to be little agreement, even within the program, on which goals are real--real in the sense that effort is actually going into attaining them--and which

are window-dressing. With this ambiguity, actors at different levels in the system perceive and interpret goals in different ways. What the Congress writes into legislation as program objectives is not necessarily what the Secretary's office or the director of the national program see as their mission, nor what the state or local project managers or the operating staff actually try to accomplish.

The evaluator is faced with the task of sifting the real from the unreal, the important from the unimportant, perhaps even uncovering the covert goals that genuinely set the direction of the program (but are unlikely to surface in open discussion), and discovering priorities among goals. Unless he is astute enough to direct his research toward authentic goals, he winds up evaluating the program against meaningless criteria. Unless he is skillful enough to devise measures that provide valid indicators of success in this complex web of expectations, he runs the risk of having his report disowned and disregarded. It is not uncommon for evaluation reports to meet the disclaimer: "But that's not what we were trying to do."

While the evaluation study is in progress, political pressures can alter or undermine it. Let us look at one final example of how organizational politics can affect the shape of evaluation research. Programs do not always keep to their original course; over time, often a short span of time, they can shift in activities and in overall strategy and even in the objectives they seek to attain. They are responding to a host of factors: budget cutting or budget expansion, changes in administration or in top officials, veering of the ideological winds, changes in congressional support, public appraisal, initiation of rivel agencies and rival programs, pervasive client dissatisfaction, or critical media coverage.

Whereas the evaluator wants to study the effects of a stable and specifiable stimulus, program managers have much less interest in the integrity of the study than in assuring that the program makes the best possible adaptation to conditions. This leaves the evaluator in a predicament; he is measuring outcomes of a "program" that has little coherence. What are the inputs? To what are the outcomes attributable? If the program succeeds, what activities should be replicated? If the program fails, what features were at fault? Unless programs under study are sheltered from the extremes of political turbulence, evaluation research produces outcome data that are almost impossible to interpret. On the other hand, to expect programs to remain unchanging laboratory treatments is to ignore the political imperatives. In this regard, as in others, programs have a logic and a rationality of their own.

THE POLITICS OF HIGHER ECHELON DECISION-MAKING

Much evaluation research is sponsored not by individual projects or by managers of federal programs but by superordinate levels, such as the director of the agency or the Secretary or Assistant Secretary of the federal department, and the reports often go to cognizant officials in the Office of Management and Budget (OMB) and the White House and to members of congressional committees. If the organizations that run programs have a vested interest in their protection, these higher-level decision-makers can view the conclusions of evaluation research with a more open mind. They are likely to be less concerned with issues of organizational survival or expansion and more with ensuring that public policies are worth their money and produce the desired effects. Of course, some legislators and Cabinet or sub-Cabinet officials are members of

the alliance that supports particular programs. But it is generally true that the further removed the decision-maker is from direct responsibility for running the program, the more dispassionately he considers the evidence.

This of course does not mean that policy-makers venerate outcome data or regard it as the decisive input for decision. They are members of a policy-making system that has its own values and its own rules. Their model of the system, its boundaries and pivotal components, goes far beyond concern with program effectiveness. Their decisions are rooted in all the complexities of the democratic decision-making process: the allocation of power and authority, the development of coalitions, and the trade-offs with interest groups, professional guilds, and salient publics. How well a program is doing may be less important than the position of the congressional committee chairman, the political clout of its supporters, or other demands on the budget. A considerable amount of ineffectiveness may be tolerated if a program fits well with prevailing values, if it satisfies voters, or if it pays off political debts.

What evaluation research can do is clarify what the political trade-offs involve. It should show how much is being given up to satisfy political demands and what kinds of program effects decision-makers are settling for or foregoing when they adopt a position. It will not be the sole basis for a decision, and legitimately so. Other information and other values inevitably enter a democratic policy process. But evidence of effectiveness should be introduced to indicate the consequences that various decisions entail.

As a matter of record, relatively few evaluation studies have had a noticeable effect on the making and remaking of public policy. There are some striking exceptions, and in any case, our time frame may be too short. Perhaps it takes five or ten years or more before decision-makers respond to the accumulation of consistent evidence. There may need to be a sharp change in administration or a decisive shift in expectations. But to date, as Peter Rossi has pointed out, devastating evidence of program failure has left some policies and programs unscathed, and positive evidence has not shielded others from dissolution. Clearly, other factors weigh heavily in the politics of the decision process.

Perhaps one of the reasons that evaluations are so readily disregarded is that they address only official goals. If an evaluator also assessed a program's effectiveness in meeting political goals--such as showing that the Administration is "doing something," or that the program is placating interest groups or enhancing the influence of a particular department--he might learn more about the measures of success that decision-makers value. He might learn why some programs survive despite abysmal outcomes, why some that look fine on indicators of goal achievement go down the drain, and which factors have the most influence on the making and persistence of policy. Just as economic cost-benefit analysis added the vital dimension of cost to analysis of outcomes, political-benefit analysis might help to resolve questions about political benefits and foregone opportunities.

It is true that many public officials in the Congress and the executive branch sincerely believe that policy choices should consistently be based on what works and what doesn't. It is also true that like all other actors in the drama, policy-makers respond to the imperatives of their own institutions. One seemingly peripheral but consequential factor is the time horizon of the policy

process. Presidents, governors, and legislators have a relatively short time perspective. They want to make a record before the next election. Appointed officials in the top positions of government agencies tend to serve for even shorter periods. The average tenure of officials in federal departments is a little over two years, as shown in a Brookings Institution study conducted by David Stanley, Dean Mann, and Jameson Doig. The emphasis therefore tends to be on take-offs, not on landings. It is often more important to a politically astute official to launch a program with great fanfare to show how much he is doing than to worry about how effectively the program serves people's needs. The annual cycle of the budget process also has the effect of foreshortening the time perspective. When decisions on funding level have to be made within twelve months, there is little time to gather evidence (at least competent evidence) on program outcomes or to consider whatever information has been gathered.

What does it take to get the results of evaluation research a hearing? In a discussion of policy analysis (of which evaluation research is one phase), Charles Lindblom states that differences in values and value priorities constitute an inevitable limitation on the use of objective rational analysis. As I have already noted, maximizing program effectiveness is only one of many values that enter decisions. Therefore, Lindblom explains, the way that analysis is used is not as a substitute for politics but as a "tactic in the play of power":

> It does not avoid fighting over policy; it is a method of fighting... And it does not run afoul of disagreements or goals or values...because it accepts as generally valid the values of the policy-maker to whom it is addressed.

It does appear that evaluation research is most likely to affect decisions when the researcher accepts the values, assumptions, and objectives of the decision-maker. This means, obviously, that decision-makers heed and use results that come out the way they want them to. But it suggests more than the rationalization of predetermined positions. There is a further, important implication that those who value the criteria that evaluation research uses, those who are concerned with the achievement of official program goals, will pay attention as well. The key factor is that they accept the assumptions built into the study. Whether or not the outcome results agree with their own wishes, they are likely to give the evidence a hearing. But evaluation results are not likely to be persuasive to those for whom other values have higher priority. If a decision-maker thinks it is important for job trainees to get and hold on to skilled jobs, he will take negative evaluation findings seriously, but if he is satisfied that job training programs seem to keep the ghettos quiet, then job outcome data mean much less.

THE POLITICS IMPLICIT IN EVALUATION RESEARCH

The third element of politics in the evaluation context is the stance of evaluation itself. Social scientists tend to see evaluation research, like all research, as objective, unbiased, and non-political, as a corrective for the special pleading and selfish interests of program operators and policy-makers alike. Evaluation produces hard evidence of actual outcomes. But it incorporates as well a series of assumptions, and many researchers are unaware of the political nature of the assumptions they make and the role they play.

First, evaluation research asks the question: how effective is the program in meeting its goals? Thus, it accepts the desirability of achieving those goals. By testing the effectiveness of the program against the goal criteria, it not only accepts the rightness of the goals, it also tends to accept the premises underlying the program. There is an implicit assumption that this type of program strategy is a reasonable way to deal with the problem, that there is justification for the social diagnosis and prescription that the program represents. Further, evaluation research assumes that the program has a realistic chance of reaching the goals--or else the study would be a frittering away of time, energy, and talent.

For many programs, social science knowledge and theory would suggest that the goals are not well reasoned, that the problem diagnosis, the selection of the point of intervention, and the type of intervention are innappropriate, and the chances of success are slight. But when a social scientist agrees to evaluate a program, he gives an aura of legitimacy to the enterprise.

Furthermore, as Roland Warren has noted, the evaluator who limits his study to the effects of the experimental variables--those few factors that the program manipulates--conveys the message that other elements in the situation are either unimportant or that they are fixed and unchangeable. The intervention strategy is viewed as the key element, and all other conditions that may give rise to, sustain, or alter the problem are brushed aside. In particular, most evaluations--by accepting a program emphasis on services--tend to ignore the social and institutional structures within which the problems of the target groups are generated and sustained. Although evaluation studies can examine the effects of non-program variables, they generally concentrate on identifying changes in those persons who receive program services compared to those who do not, and they hold constant (by randomization or other techniques) critical structural variables in the lives of that particular population.

Warren suggests that there is an unhappy convergence between the preferred methodology of evaluation research--the controlled experiment--and the preferred method of operation of most single-focus agencies. Agencies tend to deal in piecemeal programs, addressing a single problem with limited intervention. He writes:

> ...for various reasons of practice and practicality they confine themselves to a very limited, relatively identifiable type of intervention, while other things in the life situation of the target population are... left unaltered. The more piecemeal, the fewer the experimental variables involved, the more applicable is the (experimental) research design.

Methodologically, of course, experimental designs can be applied to highly complex programs (which is what factorial designs are about), but in practice there does seem to be an affinity between the experiment and the limited focus program. And if there is anything that we should have learned from the history of social reform, it is that fragmented program approaches make very little headway in solving serious social problems. An hour of counseling a week, or the introduction of paraprofessional aides, or citizen representation on the board of directors--efforts like these cannot possibly have significant consequences in alleviating major ills.

Another political statement is implicit in the selection of some programs to undergo evaluation, while others go unexamined. The unanalyzed program is safe and undisturbed, while the evaluated program is subjected to scrutiny. What criteria are used in selecting programs to evaluate? Obviously, it is the new and (perhaps) innovative program that is put on trial while the hardy perennials go on, whether or not they are accomplishing their goals, through the sheer weight of tradition.

Other criteria for selecting programs for evaluations are even more overtly political. Thus in a discussion of program analysis, Charles Schultze makes two recommendations: (1) program analysts should give more consideration to programs that do not directly affect the structure of institutional and political power than to programs that fundamentally affect income distribution or impinge on the power structure, and (2) analysts can be more useful by studying new and expanding programs than long-existing programs with well-organized constituencies.

There are persuasive reasons for such prescriptions. Evaluators, like all other analysts who ignore the political constraints of special interests, institutional power, and protective layers of alliances may confront the decision-maker with troublesome information. If time after time they bring in news that calls for difficult political choices, if they too often put the decision-maker in a position that is politically unviable, evaluators may discredit evaluation research as a useful tool. Nevertheless, there are serious political implications in restricting evaluation to the unprotected program and the program that is marginal to the distribution of economic and political power.

The structure of the evaluation research enterprise also has political overtones. To begin with, evaluation is generally commissioned by the agency responsible for the program, not by the recipients of its efforts. This is so obvious and taken for granted that its implications are easily overlooked. Some of its consequences, however, are that the officials' goal statements form the basis for study and if recipients have different needs or different ends in mind, these do not surface. Another probability is that the evaluator interprets his data in light of the contingencies open to the agency. The agency is the client and the evaluator tries to gear his recommendations to accord with realistic practicalities. Furthermore, he reports study findings to decision-makers and managers, usually not to program participants; if the findings are negative, officials may not completely bury the report (although sometimes they try), but they can at least release it with their own interpretations: "We need more money," "We need more time," or "The evaluation was too crude to measure the important changes that took place."

To the extent that administrators' interpretations shape the understanding of a study's import, they constrain the decisions likely to be made about that program in the future and even to influence the demands of the target groups. An evaluation report showing that Program A is doing little good, if interpreted from the perspective of the participants in the program, might well lead to very different recommendations from those developed by an agency-oriented evaluator or a program official.

Most of these political implications of evaluation research have an "establishment" orientation. They accept the world as it is: as it is defined in agency structure, in official diagnoses of social problems, and in the types of

ameliorative activities that are run. But the basic proclivity of evaluation research is reformist. Its whole thrust is to improve the way that society copes with social problems. At the same time that evaluation research accepts program assumptions, it also subjects them to scrutiny; its aim is to locate discrepancies between intent and actual outcome.

In addition to this reformist thrust, Harold Orlans has indicated that social science evaluators tend to be more liberal in orientation than many of the agencies they study. And their perspectives inevitably affect their research. As social scientists increasingly recognize, no study collects neutral "facts"; all research entails value decisions and to some degree reflects the researcher's selections, assumptions, and interpretations. This liberal bias of much evaluation research can threaten its credibility to officialdom. Thus, Laurence Lynn, Jr., a federal Assistant Secretary writes:

> The choices of conceptual frameworks, assumptions, output measures, variables, hypotheses, and data provide wide latitude for judgment, and values of the researcher often guide the decisions to at least some degree. Evaluation is much more of an art than a science, and the artist's soul may be as influential as his mind. To the extent that this is true, the evaluator becomes another special interest or advocate rather than a purveyor of objectively developed evidence and insights, and the credibility of his work can be challenged.

In this statement, there seems to be an assumption that such a thing as "objectively developed evidence" exists and that assumptions and values are foreign intrusions. But the message that comes through is that "objectively developed evidence" is that which develops only out of government-sanctioned assumptions and values. Certainly evaluators funded by government have an obligation to start with the official framework, but they should be able to look at other variables and other outcomes, wanted and unwanted, in addition to those set by official policy.

The intrinsically reformist orientation of evaluation research is apparent in its product. Evaluation conclusions are the identification of some greater or lesser shortfall between goals and outcomes, and the usual recommendations will call for modifications in program operation. The assumptions here are (1) that reforms in current policies and programs will serve to improve government performance without drastic restructuring and (2) that decision-makers will heed the evidence and respond by improving programming. It is worthwhile examining both these assumptions, particularly when we take note of one major piece of intelligence: evaluation research discloses that most programs dealing with social problems fail to accomplish their goals. The finding of little impact is pervasive over a wide band of program fields and program strategies. True, much of the evaluation research has been methodologically deficient and needs upgrading. (There is an extensive literature on methodological shortcomings. Donald Campbell and Selma Mushkin are among those who have written cogent critiques.) But there is little evidence that methodologically sounder studies find more positive outcomes. Numbers of excellent studies have been carried out and they generally report findings at least as negative as do the poor ones. Moreover, the pattern of null results is dolefully consistent. So despite the conceptual and methodological shortcomings of many of the studies, the cumulative evidence has to be taken seriously.

What does the evaluation researcher recommend when he finds that the program is ineffective? For a time, it may be a reasonable response to call attention to possible variations that may increase success--higher levels of funding, more skilled management, better trained staff, better coordination with other services, more intensive treatment, and so on. If these recommendations are ignored, if the political response is to persist with the same low-cost, low-trouble program, there is not much more that the social scientist can learn by evaluating participant outcomes. If program changes are made, then further evaluation research is in order. But there comes a time when scores or even hundreds of variants of a program have been run, for example, in compensatory education or rehabilitation of criminal offenders, and none of them has shown much success. If it was not evident before, it should be clear by then that tinkering with the same approaches in different combination is unlikely to pay off.

There needs to be serious reexamination of the basic problem, how it is defined, what social phenomena nurture and sustain it, how it is related to other social conditions and social processes, and the total configuration of forces that have overwhelmed past program efforts. Fragmented, one-service-at-a-time programs, dissociated from people's total patterns of living, may have to be abandoned, and as Daniel Moynihan has suggested, integrated policies that reach deeper into the social fabric will have to be developed. What this suggests is that in fields where the whole array of past program approaches has proved bankrupt, the assumption is no longer tenable that evaluation research of one program at a time can draw useful implications for action or that piecemeal modifications will improve effectiveness.

As for the other major premise on which the utility of evaluation research is based--that policy-makers will heed research results and respond by improving programming--there is not much positive evidence either. I have noted how the politics of program survival and the politics of higher policy-making accord evaluative evidence relatively minor weight in the decisional calculus. It is when evaluation results confirm what decision-makers already believe or disclose what they are predisposed to accept that evaluation is most apt to get serious attention. Thus, for example, the Nixon Administration was willing to listen to the negative findings about the Johnson Great Society programs. As Allen Schick has noted, evaluation research is comfortably compatible with a government perspective of disillusionment with major program initiatives--with stock-taking and retrenchment. As a consequence, the fiscal year 1973 budget submitted to Congress proposed to cut out or cut back programs that weren't working. The evaluation researcher--now that somebody was paying attention to findings--was cast in the role of political hatchet man.

Because evaluation researchers tend to be liberal, reformist, humanitarian, and advocates of the underdog, it is exceedingly uncomfortable to have evaluation findings used to justify an end to spending on domestic social programs. On the other hand, it is extremely difficult for evaluators to advocate continuation of programs that they have found had no apparent results. The political dilemma is real and painful. It has led some social scientists to justify continued spending on avowedly ineffective programs to preserve the illusion that something is being done. Others have called for continued spending, whatever the outcome, so as not to lose the momentum of social progress. Others justify the programs with explanations that they regarded as specious when used by program staff: the programs serve other purposes, the evaluations aren't very

good, the programs need more money, they need more time. My own bent is to find some truth in each of these justifications, but they tend to be declarations based on social ideology and faith. Evaluators can maintain them only so long without providing evidence that these factors are responsible for the poor showing or that the programs are achieving other valued ends.

What would be a responsible position for evaluation research? It seems to me that there are a few steps that can be taken. One reform in evaluation research would be to put program goals in sensible perspective. Among the many reasons for the negative pall of evaluation results is that studies have accepted bloated promises and political rhetoric as authentic program goals. Whatever eager sponsors may say, day care centers will not end welfare dependency and neighborhood government will not create widespread feelings of citizen efficacy. Programs should have more modest expectations (helping people to cope is not an unimportant contribution), and they should be evaluated against more reasonable goals. Furthermore, evaluations that average the effects of numbers of local projects and come up with summary "pass/fail" measures are not likely to be optimally useful. More learning will come from specifying the conditions that are associated with better or poorer outcomes--conditions of program operation as well as conditions in the larger social context.

A further step along this course would be to evaluate a particularly strong version of the program before, or along with, the evaluation of the ordinary levels at which it functions. This would tend to show whether the program at its best can achieve the desired results, whether accomplishments diminish as resource level or skills decline, and how intensive an effort it takes for a program to work. If the full-strength "model" program has little effect, then it is fruitless to tinker with modest, low-budget versions of it.

More fundamentally, however, it seems to me that now in some fields there is a limit to how much more evaluation research can accomplish. In areas where numbers of good studies have been done and have found negative results, there seems little point in devoting significant effort to evaluations of minor program variants. Evaluation research is not likely to tell much more. There is apparently something wrong with many of our social policies and much social programming. We do not know how to solve some of the major problems facing the society. Nor do we apply the knowledge that we have. We mount limited-focus programs to cope with broad-gauge problems. We devote limited resources to long-standing and stubborn problems. Above all, we concentrate attention on changing the attitudes and behavior of target groups without concomitant attention to the institutional structures and social arrangements that tend to keep them "target groups."

For the social scientist who wants to contribute to the improvement of social programming, there may be more effective routes at this point than through evaluation research. There may be greater potential in doing research on the processes that give rise to social problems, the institutional structures that contribute to their origin and persistence, the social arrangements that overwhelm efforts to eradicate them, and the points at which they are vulnerable to societal intervention. Pivotal contributions are needed in understanding the dynamics of such processes and in applying the knowledge, theory, and experience that exist to the formulation of policy. I suspect that in many areas, this effort will lead us to think in new categories and suggest different

orders of intervention. As we gain deeper awareness of the complexities and inter-relationships that maintain problem behavior, perhaps we can develop coherent, integrated, mutually supportive sets of activities, incentives, regulations, and rewards that represent a concerted attack and begin to deserve the title of "policy."

How receptive will established institutions be to new ways of looking at problems and to the new courses of action that derive from them? I suggested earlier that decision-makers tend to use research only when its results match their preconceptions and its assumptions accord with their values. There will certainly be resistance to analysis that suggests changes in power relations and in institutional policy and practice. But legislatures and agencies are not monoliths and there may well be some supporters, too. As time goes on, if confirming evidence piles up year after year on the failures of old approaches and if mounting data suggest new modes of intervention, this will percolate through the concerned publics. When the political climate veers toward the search for new initiatives, or if sudden crises arise and there is a scramble for effective policy mechanisms, some empirically grounded guidelines will be available.

Of course, there remains a vital role for evaluation research. It is important to focus attention on the consequences of programs, old and new, to keep uncovering their shortcomings so that the message gets through, and to locate those programs that do have positive effects and can be extended and expanded.

It is important to improve the craft of evaluation so that we have greater confidence in its results. To have immediate and direct influence on decisions, there is a vital place for "inside evaluation" that is consonant with decision-makers' goals and values--and perhaps stretches their sights a bit. There is also a place for independent evaluation based on different assumptions with wider perspectives, and for the structures to sustain it. One of the more interesting roles for evaluation is as "social experimentation" on proposed new program ventures--to test controlled small-scale prototypes before major programs are launched and thereby gain good measures of their consequences.

Nevertheless, given the record of largely ineffective social programming, I think the time has come to put more of our research talents into even earlier phases of the policy process, into work that contributes to the development of ideas and prototypes. I believe that we need more research on the social processes and institutional structures that sustain the problems of society and closer social science involvement in the application of that research. I have hope that this can contribute to understanding which factors have to be altered if change is to occur and, in time, to more effective program and policy formation.

MODULE VI

MODULE VI: NETWORKING AND INTERAGENCY COLLABORATION **TIME:** 4 HOURS

GOALS

- To explore options for program growth through networking and interagency collaboration
- To apply these concepts to participants' programs and communities.

OBJECTIVES

At the end of this Module, participants will be able to:

- List at least five other local organizations and agencies in their community with whom the potential for collaboration exists
- Describe the basic assumptions behind networking
- Develop a plan for a prevention support network within their own community
- Identify at least one program objective which might be achieved through networking or interagency collaboration.

MATERIALS

- Paper
- Pencils
- Newsprint
- Magic Markers
- Tape
- Participant Manual
- Supplementary Material
- Selected Readings

MODULE VI	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. OBSTACLES AND CONSTRAINTS TO INTERAGENCY COLLABORATION	1 HOUR	LARGE-GROUP LECTURE AND SMALL-GROUP EXERCISE
2. INTERAGENCY COLLABORATION	1 HOUR 10 MINUTES	LARGE-GROUP LECTURE/DISCUSSION/ DEMONSTRATION
3. NETWORKING AND COLLABORATING	1 HOUR	LARGE-GROUP LECTURE/DISCUSSION
4. APPLYING IT TO YOUR OWN PROGRAM	30 MINUTES	SMALL-GROUP DISCUSSION
5. CAVEATS OF NETWORKING/ INTERAGENCY COLLABORATION	10 MINUTES	LARGE-GROUP DISCUSSION
6. WRAP-UP/SUMMARY	5 MINUTES	LARGE-GROUP LECTURE

PROFILE OF A NURSE

You are a nurse in the emergency room of the community hospital. Being a nurse has been both a rewarding and frustrating experience for you. Lately, things have not been going well for you.

One of your best friends who is also a nurse was transferred from the emergency room to another floor. You miss his/her company and his/her counsel. Even worse, you know that you are capable of doing a better job. You find that your greatest difficulties are with those who come to the emergency room because of drugs. To help these patients, you feel you need additional knowledge and skill concerning drug abuse, but you are not sure of how to go about getting it.

You are very concerned now because you are being considered for a promotion, and your abilities are being evaluated. This promotion would make you the head of the nursing service in the emergency room. The status that accompanies the new position is something you want very much. You hope that as head nurse you would be able to do more and command more respect.

Adapted, with permission, from Games Agencies Play; Enhancing Interagency Colloraboration in Drug Rehabilitation, pp. 216-17, August, 1976. Interagency Collaboration Project, Bureau of Drug Rehabilitation, Virginia Department of Mental Health and Mental Retardation, Richmond, Va. This project was funded in part by Grant Number 75A3137 from the Virginia Division of Justice and Crime Prevention.

PROFILE OF A SHERIFF

You are a sheriff for the local community. Over the past few months, you have noticed that the number of drug abusers being arrested has been steadily increasing and that community concern with the drug problem is on the rise.

The large number of drug related arrests concerns you because you would like to retain your influence in the community and to be seen as a proponent of drug rehabilitation efforts. Moreover, your credibility and prestige within the community is in the balance since the community feels you are not adequately handling the problem. Because of the growing drug problem, your budget is in question and you are worried about the money to be allocated to the sheriff's office.

Yet, you have had very little contact with the local drug rehabilitation program and have minimal knowledge concerning drug traffic in the local community. If you were able to find out what was going on in the street and in drug rehabilitation efforts in the community, it is possible you would be able to do more.

Adapted, with permission, from Games Agencies Play; Enhancing Interagency Colloraboration in Drug Rehabilitation, pp. 216-17, August, 1976. Interagency Collaboration Project, Bureau of Drug Rehabilitation, Virginia Department of Mental Health and Mental Retardation, Richmond, Va. This project was funded in part by Grant Number 75A3137 from the Virginia Division of Justice and Crime Prevention.

INTERAGENCY COLLABORATION

By

The Interagency Collaboration Project

Reprinted, with permission, from Interagency Collaboration: Principles of Consultation in Mental Health, pp. 21-42, 44-52, Richmond, Va., 1975.

PERSONALITY, MOTIVATION, AND NEEDS

Section IV concluded that if we are to enhance interagency collaboration in human service delivery, the individual staff members must be both the actor and target of the interaction. The study of personality deals with the individual as a system of needs, feelings, attitudes, skills, deficiencies and roles. These elements combine to determine an individual's behavior in a social milieu and have only recently come to be recognized in regard to the individual's satisfaction and performance in a working environment. This new approach tends to discount the image of an economic, bureaucratic man as a uniform factor in the production process, in favor of the image of man as a complex personality within the organization. This section on personality, motivation, and needs deals with the importance of the individual to the effective functioning of an organization. The importance of individual role behavior needs and the effects of neglecting them will be discussed below.

The motivation of an individual to perform in an agency can be examined most conveniently on the basis of need theory. Maslow (1970) proposed a hierarchy of human motives or needs. These needs range from lower deficiency motives which determine behavior when their satisfaction is lacking, to higher being motives, (physiological needs, safety and security needs, belongingness and love, self-esteem needs, growth and self-actualization needs) which come into play once the deficiency motives have been satisfied.

Alderfer and Schneider (1973) propose three needs categories which they called existence needs, relatedness needs and growth needs. The existence needs correspond to the physiological and material safety needs of Maslow (1970) and are characterized first, by the goal of obtaining a valued resource vital to material existence, and second, by a person's satisfaction tending to be correlated with another person's frustrations when resources are limited. Alderfer's relatedness needs correspond to the interpersonal safety belongingness, social, and interpersonal esteem needs of Maslow. Relatedness needs concern the desires people have for relationships with significant others that can be characterized by a mutual sharing of thoughts and feelings. Finally, growth needs correspond to Maslow's self-actualization category and include desires of the individual to have creative and productive effects upon himself and upon his environment.

H.A. Murray (1938) has categorized needs into two basic groupings called viscerogenic needs and psychogenic needs. The first grouping includes physiological needs of the organism and the second group includes psychogenic needs such as superiority, achievement, recognition, exhibition, autonomy, affiliation, and exposition needs.

Finally, Herzberg (1966) classifies needs as "Adam" or "Abraham" needs, the former being basic viscerogenic needs and the latter being man's urge to realize his own potentiality by continuous "psychological growth." Six aspects of "psychological growth" are knowing more, seeing more relationships in what we know, being creative, being effective in ambiguous situations, maintaining individuality in the face of pressures from the group, and attaining growth psychologically.

Bartow (1972) takes the concept of an individual's needs a step further by introducing the element of interaction among individuals. In the interaction there is an exchange that occurs, and through this exchange an actor will satisfy some of the needs of the other actors participating in the interaction. An ideal situation is one in which an actor's own needs as well as another actor's needs are met. To the extent that the interaction is an exchange through which some of both persons' needs are met the experience will be satisfying and the members will be motivated to continue performing. Thus, in an organizational setting if some of an individual's needs are satisfied by performing a function which his organization demands of him, the individual will be motivated to continue performing. The attainment of satisfaction from one's work may be viewed as a function of needs satisfaction in that the individual will be motivated to replace lower level needs with higher level needs. In an organizational setting, an individual's needs can range from the need to earn money to ensure existence, to the need to ensure financial and social security, to the need to maintain a certain social position or place of esteem in society, to the need for affiliation and social relatedness, to the need to create, and thus strive for growth and self-actualization through work.

What happens then in a society such as ours where a sizeable portion of the working force has already satisfied its viscerogenic needs? Erich Fromm (1968) states:

> "While it is true that man is molded by the necessities of the economic and social structure of society, he is not infinitely adaptable. Not only are there certain physiological needs that imperatively call for satisfaction, but there are also certain psychological qualities inherent in man that need to be satisfied and that result in certain reactions if they are frustrated. The

most important of these qualities seems to be the tendency to grow, to develop and realize potentialities which man has developed in the course of history as, for instance, the faculty of creative and critical thinking and of having differentiated emotional and sensuous experiences."

Technological societies often fail to take these human needs for creative growth into account leading to the possible alienation of man from basic human values. Such alienation can have grave implications for society.

To avoid creating a sterile work situation in which there is no opportunity for the individual to satisfy higher level needs it is necessary to integrate the framework of individual needs satisfaction with the organizational setting. The individual places greater emphasis on ego needs and the appropriateness of the job to his personality than does the organization. Each individual makes unique demands of his job depending on the composite of his needs. Harry Levinson (1966) proposes the concept of reciprocation to denote the process of fulfilling mutual expectations and satisfying mutual needs in the relationship between a man and his work organization. To the "extent that there is congruence of aims, norms and personality, the organization is efficient and the workers are happy."

Argyris (1964) like Levinson concludes that congruent behavior on the part of the employees with interpersonal needs is necessary if they are to continue to be motivated, and if the formal organization is to obtain optimum expression of its demands. He writes:

> "If one uses as an input, agents who tend toward a mature state of psychological development, one thus creates a disturbance, because the needs of healthy individuals are not congruent with the requirements of formal organizations which tend to require the agents to work in situations where they are dependent, passive, and use few skills. The nature of the formal principle of organization causes the subordinate to experience competition, rivalry, intersubordinate hostility, and to develop a focus toward their parts rather than the whole. This tends to a need for coordination among the parts by the leader."

Relating specifically to organizational individual commitment, Argyris claims that the source of commitment to work for any given individual lies in the power, rewards, and penalties that some other individual may use to influence him. However, "internal commitment" exists only when the motive for a parti-

cular behavior resides within the worker himself. Argyris (1964) concludes:

> A certain amount of internal commitment restricted to rational activities may be possible in this system if the rational, intellective aspects of the job are consonant with the individual's abilities and expressed needs. Some human behavior in organizations can be understood as caused by individuals adhering or dedicating themselves to organizational values.

If we perceive the organization as a social milieu, then it can be considered an arena in which the individual exhibits social reactions based upon his learning and experience from other social milieus, the major one most probably having been the family. Insofar as the individual is in perpetual contact with others in the process of performing his job, the importance of his interpersonal patterns of behavior becomes apparent. By requiring an individual to suppress certain interpersonal and emotional aspects of behavior, the organization establishes a norm which could have adverse effects both on the individual and on the organization itself.

The implications of such a suppression have been raised by Argyris (1964) who postulates that a basic need of man is to increase his feelings of acceptance, by himself and others. Through leading the individual to awareness and acceptance of himself and others, interpersonal relations become the mechanism by which man develops, maintains, and modifies his personality. He writes:

> As the interpersonal and emotional aspect of behavior becomes suppressed, we may hypothesize that an organizational norm will tend to arise that coerces individuals to hide their feelings. Under such conditions, the individual finds it difficult to develop competence in dealing with feelings and interpersonal relationships.

In addition, Fromm (1955) notes that: in fact, the very decision to separate one's emotions from one's intellective aspects is a deeply emotional one. There is increasing concern that this act of 'self-separation' is part of a basic process in modern life which leads man to become alienated from himself and others.

The problem of separation of "one's emotions from one's intellective aspects" is especially pertinent to public service, welfare and people-processing organizations. Workers in these

organizations are expected to be competent and rational in client situations yet they must also be carefully attuned to the client's emotions. The need for a more humanistic and needs oriented organizational environment for service organizations is clear.

Since the individual is central to the focus of collaboration, the needs and motivations of individuals in the working environment become significant. The importance of the "needs" of individuals is due to their effect on individual behavior and therefore staff collaboration. In reviewing the literature and the needs structure, "needs" in the context of this project were limited to those which most directly influenced the individual's performance of his organizational role. Thus, project staff derived a list of eight needs considered to be most important. They are: control of information, funding, power, professional competence, relatedness, status, support, and task attainment. These needs come from the work of Maslow (1970), Bartow (1972), Herzberg (1966) and others. (It must be emphasized that the purpose of this project was not to develop and test a new "needs structure." Rather, research studies were used as a starting point from which we were able to create a "role behavior needs" structure.)

One possible solution to the improvement of worker motivation and performance is the satisfaction of the worker's needs through his interpersonal working relationships. Relating the fulfillment of an individual's needs through interagency collaboration to work performance and service to clients is the approach taken by the project. Collaboration is one approach an organization can employ to further relatedness and growth opportunities for its employees and to motivate them toward improved quality of service. By enabling the individual to satisfy psychological needs work becomes a positive experience. Group collaboration is a possible incentive in addition to conventional incentives that can be used to motivate individuals. Group collaboration in an organizational setting can have positive implications for the organization as well as for the individual.

The conceptual framework developed by the project for mutual needs fulfillment can be a powerful tool for enhancing collaboration in an interorganizational setting. The framework focuses on the satisfaction of the individual's needs in another agency as critical to the reciprocal process of having one's own needs met. Through reciprocity and exchange theory, as well as need/personality theory, the framework has incorporated these necessary elements. It is unique in its emphasis on the individual and the meeting of his needs for successful interagency collaboration.

INTERAGENCY COLLABORATION CONCEPTUAL FRAMEWORK

To convey the meaning and clarify the conceptual path taken in this project a mapping sentence is used. The mapping sentence is a mechanism for logically organizing material by representing the entire theoretical approach of the project in one simply read sentence. Mapping sentences use facet theory as developed by Professor Louis Guttman, Director of the Israel Institute of Applied Social Research in Jerusalem. For an explanation of facet theory and the mapping sentence technique, the reader is referred to the "Inter-Agency Collaboration in Drug Rehabilitation" report Chapter II, Section II.

Figure I, (page 29), is the mapping sentence which specifies the project's conceptual framework and presents its major concepts and their inter-relationships. The letters appearing in Figure I signify important aspects or facets of the conceptual framework and each line of material listed below the facet and enclosed in parentheses is considered an element of that facet. For example, the Referrals facet, letter I, contains two elements, number and maintenance, which together form the facet. By reading through the mapping sentence with its facets and elements one can see the relationship between important factors in the project's conceptual framework and the subcomponents which make up those factors. It should be noted that facet I, Referrals in Figure I was designated, for purposes of research, as the input to a drug rehabilitation program. Thus the mapping sentence in Figure I was designed to be referral specific; however, the utility of the mapping sentence lies in the fact that any facet can be changed or replaced. Facet I could be modified to represent another input such as funds or volunteers. Quite often in consultation other resources or inputs may be discussed and modifications of facet I might be necessary for those who use this conceptual framework. The mapping sentence in Figure I is already organized so that the concepts are logically arranged and can serve as a basic starting point for the conceptualization of additional constructs and facets of interagency collaboration. To explain the project's framework, we will make use of the order found in this mapping sentence.

The facet of Action Potential (A) is a behavioral facet included in almost every mapping sentence. Behavior in this framework consists of covert and overt action. This facet is defined by the three elements, knowing, liking, and doing. By using these three elements one may differentiate between organizations in terms of whether or not they use SSR (Social System Relatedness) behavior appropriately. SSR is a social systems approach to improving interagency collaboration. Assessments of three elements of Action Potential can help in determining the quality

FIGURE I
MAPPING SENTENCE REFLECTING THE PROJECT'S
CONCEPTUAL FRAMEWORK

A	B	C
The appropriate Action Potential of		Areas of SSR*
(knowing)	(existing)	(input sources)
(liking)	(utilizing)	(network linkages)
(doing)		(articulation of related roles)

D		
Individual (X) utilizing	Techniques of SSR*	for fulfilling the
	(initiation of contact)	
	(types of contact)	
	(resource accessibility)	
	(provision of expertise)	
	(instillation of cognitive clarity re: program)	

E		F		G
Role Behavior Needs	of a	Referent	in a	Community Agency by
(control of information)		(director)		(mental health services)
(funding)		(supervisor)		(social services)
(power)		(line worker)		(general hospital)
(professional competency)				(court system)
(relatedness)				(schools)
(status)				
(support)				
(task attainment)				

H		I	
Referent	for securing appropriate	Referrals	of clients for a drug rehabilitation program
(director)		(number)	
(superviser)		(maintenance)	
(line worker)			
(client's family)			
(significant others)			

hi
in terms of the appropriate use of SSR (facets C, D, and I).
lo

*SSR - Social System Relatedness

of SSR behavior. For example, one can look at whether or not staff members see a need for SSR, whether or not they like using it and whether or not they have the time and skill to use SSR behaviors.

The total SSR approach which evolved from systems theory consists of areas of SSR (facet C), techniques of SSR (facet D) and role behavior needs (facet E). Awareness and use of the SSR approach as delineated in facets C, D, & E of Figure I, make it possible to analyze and improve the interorganizational oriented activities of drug program staff members. Effective use of the SSR approach in collaboration involves the development of strategies, tactics and plans to integrate and incorporate all three facets in a wholistic manner.

Areas of SSR indicate certain properties of organizations which influence interaction and which the staff of organizations may find useful in achieving their goals. They do not prescribe behavior directly nor do they tell one what to do; rather, they conceptualize the areas or characteristics of the social system which are then operationalized in the SSR techniques of facet D.

Elements of facet C, areas of SSR, include input sources, network linkages, and articulation of related roles. These elements are directly influenced by their derivation from open systems theory. They emphasize the interdependency of the organization on the environment and necessitate a clear conception of how the total system operates.

In terms of open systems theory every organization needs to secure a sufficient number of inputs, i.e., referrals, funds, volunteers and the like, to survive. For drug programs, this involves such things as clients, staff and funding. Drug rehabilitation programs usually get clients from a limited number of sources, primarily "street" (self) and court system referrals. Increasing the appropriateness of referrals often follows hand in hand with increasing the size and number of referral sources. Although referrals to drug programs usually come from a limited number of sources, it is posited that many potential clients to drug programs have relationships with individuals from other community service agencies. By approximately relating to and making use of those agencies, it is possible that a wide variety of community service agencies will refer clients. If the referral network is increased, the dependency of the drug program on one or two referral sources is minimized.

Expanding the referral network to include various sources can have the effect of increasing the spectrum of clients reaching the program by:

1. Increasing the number of clients referred from various community service agencies

2. Increasing the diversification of clients by expanding the number of referral sources

Expansion of the referral network and the consequent increase in the number of referrals through contact of drug program staff with other agencies can lead to increased drug program utilization and increased appropriateness of referrals.

The element of input source in facet C (see Figure I) focuses on a program's need for clients and the efforts necessary to acquire them. Attempts to acquire referrals can involve both direct and indirect contacts by drug program staff to benefit the program. However, before discussing the meaning of direct and indirect contacts, the term network linkages will be explained.

The concept of network linkages in facet C has been illustrated by Barnes (1954) as, "... a set of points some of which are joined by lines. The points of the image are people or sometimes groups, and the lines indicate which people interact with each other." For drug rehabilitation staff the network linkage applies to the indirect lines or channels of communication existing between them and appropriate referrents of community service agencies.

The concept of network linkages is similar to open systems theory in that they both emphasize the innerconnectedness of the system. To clarify how a network exists and is interconnected, Hammer (1964) states:

> To the extent that a given interaction has necessary implications beyond the immediate situation, it must involve, indirectly, other individuals with whom each of the original participants interacts at other times. A divorce, for example, does not merely alter the relationship between one man and one woman. It also alters the relationships with landlords, neighbors, and other family members, decreases the frequency of contact with some of the people they generally saw together, increases the frequency of contact with the people each of them saw separately, and so on.

Knowledge of these social network linkages and their nature provides a basis for affecting the outcome of a given situation. For example, identifying the network linkages to and from the policy-making level and studying the network linkages between the policy makers themselves can provide significant knowledge for determining with whom one should establish and continue contact. The contacts a staff member has and uses may be both direct and indirect. Direct contacts are those which an individual has with one other person to secure referrals to a drug program. Indirect contacts must include three people and can involve more. With indirect contacts an individual uses a third person to influence another agency or individual to refer clients immediately or eventually to a drug program. Professional gossip is a significant source of information and provides insight into the channels of influence in an organization as well as the roles and functions of the members of the organization.

To pull together the knowledge of the staff to improve services, there must be considerable integration of the staff to make effective, concerted, and noncontradictory use of the linkages. This requires articulation of related roles, open channels of communication, and support.

The use of network linkages requires the clear definition and explication of the respective roles of those individuals in an organization who are relevant to the continued treatment of the client. Network linkages relate to this articulation of related roles in that an understanding of the network linkages implies a knowledge of how the system operates. Knowledge of the organization and the existing network linkages of communication and influence necessitates the articulation of related roles among program staff members.

In summary, facet C, (areas of SSR) relates to the intraprogram allocation of tasks in order to achieve program goals. A limited number of people decide who will interact with whom to accomplish the purpose (Facet I) of referral and maintenance of clients in the focal drug rehabilitation program. This is a social system task allocation related to the securing of appropriate referrals (Facet I).

Techniques of SSR, (facet D) refers to the specific behaviors used by workers in their contact with staff of other agencies. These techniques can be used to enhance interaction between drug program staff and community service agency staff by prescribing types of behavior and different forms of interaction which should be used to achieve desired results. The distinction

between the areas and techniques of SSR lies in the difference between their levels of abstraction. Areas of SSR are conceptually abstract, and general in nature, in contrast to techniques which are more practical and action oriented. Techniques of SSR delineate areas of the subsystem that have a crucial effect on interorganizational relationships.

The techniques include: initiation of contact, types of contact, resource accessibility, provision of expertise, and instillation of cognitive clarity regarding the program.

Within the five techniques, there are differences in terms of the levels on which they operate and their relationship to the areas of SSR (which is not necessarily on a one-to-one basis). The following is a brief explanation of the techniques of SSR.

Techniques of SSR

Initiation of Contact

It is important, if the areas of SSR are to be utilized, for the drug rehabilitation program staff to initiate or begin contact with a considerable number of staff from other community service agencies. This can be an important factor both at the developmental stages of interaction and in maintenance of contact.

Types of Contact

Contact can range from formal to informal, direct to indirect, and vary according to the number of people reached in the contact. These different types and levels of communication can be used by a staff member to engage another staff member in interaction rather than relying on only one form of contact. The project identified five forms of contact including: shooting the bull, face to face, phone, lecture, and media. Although most are self-explanatory, the first two require some discussion. "Shooting the bull" refers to the use of informal ideological discussions and joining in on professional gossip to enhance the areas of SSR. By contrast, "face to face" contact connotes direct meetings between drug rehabilitation staff and staff of other agencies.

Resource Accessibility

Resource accessibility refers to the drug rehabilitation program's use of certain arrangements or behaviors which facili-

tate both client and personnel of outside agencies in contacting staff members and receiving those services required from the program. Dimensions of resouce accessibility include: staff accessibility and availability, efficient intake process and sharing the client.

Provision of Expertise

Provision of expertise is a process whereby staff members of a community service agency receive relevant information from drug program staff members which assist them in improving their skills. This is similar to a consultation or teaching relationship. Provision of expertise does not include discussing the procedures of one's particular program.

Instillation of Cognitive Clarity regarding the Program

This technique entails the drug program staff clarifying to others (community service agency personnel) the ways in which a drug program functions and who they serve. By using this technique, community service agency personnel will have an understanding of the drug program which will impact on the drug program's securing of clients and their maintenance.

"Role Behavior Needs" (facet E of the mapping sentence) refers to the needs of an individual in the task environment as determined by his role in an organization, the organization's own needs, and by the individual's existential needs. Role behavior needs describe the needs of an individual occupying a role in a community service agency. Although staff members may have comparable job descriptions, the way they carry out their roles in an organization will also depend on their needs and personality. Because of this, the hierarchy of an individual's role behavior needs will differ from others according to his personality, organization and his role in the organization. The following is a brief explanation of the role behavior needs we believe to be most salient in a work situation.

Role Behavior Needs

Control of Information

An organization consists of people filling specified roles. The actions individuals make in the organization are communicative acts or information exchanges. Thus, according to Katz and Kahn (1966), communication can be viewed as the essence of a social

system or an organization. Yet communication and information at random have no meaning; hence, the necessity of channeling the information so that it is easily accessible.

Control of information incorporates two ideas:

1. The desire to possess knowledge regarding what is occurring in an organization

2. The need for a mechanism making it possible to obtain desired materials and information consistently and easily

Funding

The need for necessary funds is a constant and very fundamental requirement of an organization. Without the necessary funds to support the organization it will not be able to continue operating.

Power

Power is the ability to influence others directly for one's own ends. It implies the ability to wield coercive force -- a possession of control, authority, or influence over others. In the field, we looked for an individual's need for power and the respondents' ability to satisfy that need.

Professional Competence

Professional competence refers to the specialized knowledge or skills which some individuals possess. One finds people attempting to develop their professional skills or acquire others and have these skills recognized by co-workers. These were the attitudes we were looking for in the field -- behaviors going beyond simply completing a job or task to concern with accomplishing it well in a professional sense.

Relatedness

Relatedness refers to an individual's becoming a part of the social network including a sense of belonging, a "we feeling" resulting from common experiences, identity, cohesion, and division of roles. It is a state in which an individual is affiliated with other individuals or groups. For example, a sense of relatedness or belonging is felt when a group is working towards the same objectives.

Status

Status is formed on the basis of the amount of socially ascribed prestige or honor. In behavioral terms, it involves deferential and respectful behavior based on a ranking of positions according to comparable levels of prestige. A need on the part of an individual for being the object of deferential behavior was classified as female status need.

Support

Support refers to the referent's need for assistance or aid, and the function of the respondent or indirect contact person as a prop for that referent. It is an emotional response between two individuals involving such behaviors as spending time with another, expressions of empathy, and verbal support.

Relatedness differs from support in terms of the levels at which they apply. Support is more of an emotional response which two or more individuals share whereas relatedness is less emotional or personal involving an entire group.

Task Attainment

Task attainment refers to the achievement or completion of assigned work or one's job. Individuals not only occupy positions in organizations but they also must achieve some of their assigned tasks. Task attainment can involve skills mastery, efficiency and quality of performance. Each individual needs to derive some feeling of satisfaction for having done his job. By identifying and meeting these needs using the SSR techniques of facet D, a positive relationship can be established and maintained between drug program staff and community agency personnel. For a further explication and demonstration of the SSR approach to interagency collaboration, the reader is referred to the "Enhancing Inter-Agency Collaboration: A Workshop Training Manual."

The elements of facets F and H are included in the mapping sentence for research purposes to reflect the individuals in other agencies to whom the SSR approach may be applied (facet F) and the individuals within or related to a drug program who may use the approach (facet H). Facet G, Community Agency, simply defines, again for research and descriptive purposes, the organizational context in which the collaborative interactions take place. As mentioned earlier, the utility of the mapping sentence lies in the fact that facets such as F, G, and H can be modified or changed to reflect a different set of actors or

situations in which the collaboration can occur. Taken as a whole, the project's conceptual framework is a means of relating the interpersonal interaction of individuals from different organizations to interagency collaboration.

Specifying referrals (facet I) as the criterion for observing the effectiveness of SSR, the project conducted a study to assess the results of a practical application of the conceptual framework in the field.

From the project's study of staff collaborative behavior in five comprehensive drug rehabilitation programs with individuals in other community agencies a number of interesting relationships were found between the quantity and quality of interagency contact and client referrals and their maintenance in a drug program.

The study suggested that if a drug program staff member invests in a relationship with a community agency staff member by using specific SSR (Social System Relatedness) interpersonal techniques to fulfill role behavior needs, then the community agency staff member will reciprocate by referring appropriate clients to the drug program, and by helping these clients to make better use of of the program. The outcome of this type of collaborative behavior is enhanced service to clients.

The results of the study showed a significant positive relationship between a drug program staff's collaborative activities and the number of referrals which the program received. The maintenance of these referrals in the program was also positively related to these activities. Drug programs that have staff members who engage in such activities as 1) making frequent, direct contacts with members of other community agencies, 2) having an awareness of the needs of the individuals whom they contact, and 3) trying to meet those needs using various interpersonal techniques were shown to have a greater number of referrals to their program and were able to maintain these referrals for a longer period of time. The importance of engaging in all three activities was demonstrated by the finding that a high frequency of contact between a drug program staff and the staffs of other agencies alone is not sufficient to insure increased referrals and maintenance. It is the quality of contact between individual members of each agency which establishes the positive relationship. Mere contact without the use of SSR techniques and awareness of role behavior needs is not related to increased referrals and maintenance. However, it was found, in general, that the greater the number of referral sources which a program had, the greater the number of referrals secured by that drug rehabilitation program.

In studying the relationship of client maintenance in a program to staff collaborative behaviors, it was discovered that community agency referrals are more effectively maintained than "street" referrals. Such a finding lends support to the need for emphasizing the development of community agencies as input sources for clients.

While the study found that direct interactions between drug program and community agency staff can be quite beneficial for the drug program, community agency and client alike; indirect contact (through a third person) between a drug program staff member and a staff member from another community agency was negatively related to the number of referrals a program received. Working with one person indirectly by way of another may lead to active noncooperation, especially if no attempts are made to establish direct contact. This negative effect, however, was not seen to carry over to mainteance of clients in a program. No relationship was found between the staff member of a drug program using indirect SSR and the maintenance of clients in a program. Overall, though, attempting to collaborate indirectly with individuals of other community agencies through a third person was found to be either ineffective or detrimental to increased program utilization. Data showed that while such indirect contact may be necessary to establish a collaborative relationship, maintenance of such a third party arrangement was not found to be beneficial in this study. Although the focus of the study was limited and further research is needed to discover what other factors are affected by drug program staff interaction with individuals from other agencies, the study did show that interagency collaboration does help secure and maintain clients in community-based comprehensive drug rehabilitation programs. Subsequent observations and consultations on collaboration in the field have corroborated these results and have indicated that the conceptual framework can be expanded to effectively acquire other input resources besides referrals.

Since the study was conducted, the collaboration project staff have redesigned the instrument used to assess the quantity and quality of drug program staff collaborative activities (See Appendix). The questionnaire, entitled the "Interpersonal Collaboration Inventory", is a self-administered instrument which assesses a drug program staff member's interaction with an individual from another community agency in relation to the conceptual framework's eight role behavior needs and SSR techniques. When used in conjunction with consultation, the "Collaboration Inventory" can be used diagnostically to obtain information on individual staff interaction with key personnel from another agency.

The information we have presented in Chapter I has attempted to shed as much light as possible on one effective means of interaction between community agencies. The project's study provides strong evidence in favor of the collaborative approach. The knowledge of "Social System Relatedness" provides a conceptual basis for research as well as consultation with human service providers on interagency relationships. Each section of Chapter I has presented information which was instrumental in the development of the project's conceptual framework. Each section, however, can present only a few aspects of the complex phenomena of interagency interactions. It remains for the consultant to identify and apply those ideas or concepts which are relevant to a particular situation. Taken as a whole, Chapter I, may be viewed as an information resource to help the consultant in formulating and specifying some theoretical schemata for dealing with the issues, obstacles and constraints encountered in consultation on interagency collaboration.

PRINCIPLES OF CONSULTATION IN MENTAL HEALTH

In an effort to clarify what is meant by mental health consultation, this section will look at the consultation process, its definitions, structural arrangements, phases, quality, and participants.

Mental health consultants assist mental health services in a number of areas including indirect services, helping solve specific problems, giving information, and evaluating services. Additional consultation services involve providing direct service to clients, strengthening client abilities, giving reassurance, and being an "impartial" outside observer. Bindman (1959) further designates the role of the consultant as providing technical assistance and helping key persons within an agency. The utilization of mental health consultants has proven to be a relatively satisfactory arrangement for all involved; however, there is some feeling that reliance on mental health consultants has been one of too much dependence and sometimes inappropriateness. That is, consultation in mental health has been thought of as a panacea such that there is a "seductive quality in the vision of the gifted, insightful mental health consultant imparting knowledge" (Bindman, 1959). In fact, Mendel (1968) has found that the disparity between the ideal model of consultation and actual consultation as practiced is great. Mendel (1968) attributes this disparity to a lack of interest, priority, and research placed on transactions in consultation. Thus, although consultants are used extensively, the expectations of their abilities, along with their training and use are not always realistic.

Consultants and Consultation Defined

Many have tried to quantify and capture precisely what a consultant is by defining the consultant and consultation process. Gerald Caplan (1954), an authority in this field, defines consultation as a "process of interaction between two professional persons, the consultant (specialist) and consultee, invoking the consultant's help in regard to a current work problem." Consultation occurs then when there is interaction between an outside specialist and a representative of the agency involved. The consultant (as a specialist designated to assist with an organization's problems and make recommendations) need not and should not assume direct responsibility for implementing any remedial action. It is up to the consultee to accept or reject any part of the advice. The relationship between the consultation partners should be of equals working together to deal with a particular problem (Caplan, 1954).

Others have defined the consultant's responsibilities similarly. Kaufman (1953), Brockbank (1968), and others view consultants as catalysts and as investigators. Schwab (1968) adds to the consultant's role the dimension of interpreter. Rogawski (1968) thinks that the consultant's "responsibility is to help staff to function in the best possible manner whatever their functions may be." Thus, the consultant is someone external to the focal agency who can offer technical assistance and can in his separateness from the organization help create change within an agency. His role is a very important one in that any assistance he is able to provide is of direct benefit to the client through an improvement of services.

Phases of the Consultation

Although there is no one pattern which all consultations follow, many have tried to categorize what a typical consultation is like. As a general rule, the categorizations developed illustrate similar processes occurring in consultations.

The pre-consultation and negotiation phase of the consultative relationship can be crucial to the success of the consultation itself. At this point in time, it is necessary to clarify in specific terms a number of aspects of the consultation process.

One crucial consideration in the consultation process is the precise role which the consultant is to play while involved with the agency. Through the clarification of the consultant's role, the staff's apprehension regarding the consultant will be reduced and their expectations of the consultant's work will be

in line with his competencies. Also through a discussion of the consultant's role, there is often further clarification of the problems prompting the consultation and thus the consultant, by understanding the problems, is in a better position to relate his functioning to needed outcomes. Brockbank (1968) suggests during this "entree phase" a period of participant-observation for the consultant in the agency receiving consultation. The consultant therefore assumes the role of a learner during the initial phase. Caplan (1954) discusses the pre-consultation phase in terms of those contractual arrangements which should be made prior to consultation itself. A plan of action or, more formally, a contract for the consultation is essential prior to the actual beginning of the consultation. Writing a contract forces those involved in the consultation process to be very specific about the goals and projected outcomes of the consultation. In addition, a contract can help make the expectations more realistic and will serve as a protection to the consultant.

The need to establish a formal contract has been emphasized throughout the consultation literature by Caplan (1954), Brockbank (1968), Gebbie (1970), Brown (1967) and others; however, the contract should not be allowed to become a barrier if the original goals and expectations prove inappropriate. If the consultation contract becomes unworkable, the contract should be renegotiated to fit existing needs.

One area which Caplan (1954) identifies as requiring preparation is the subject matter of the consultation. The consultees should have a basic concern or problem around which the consultant can guide discussion. Closely related to the above is the use of an informant within the organization to provide information regarding what is occurring in the agency. An informant can be used by the consultant to judge the accuracy of the information received and in his construction of the situation.

In terms of the entire consultation, a number of phases or processes can be identified. Robbins and Spencer (1968) divide consultation into three parts: the beginning, middle, and end. At the beginning of the consultation there is a sharing of information, with the consultee speaking for long periods of time while the consultant listens. As the consultation progresses, the consultant assumes a more active role by analyzing, clarifying, and bringing into perspective shared information. Increasingly in this middle phase, the consultant will offer opinions and statements evaluating the information. In the last phase, the consultant summarizes what has happened in the consultation and analyzes the information exchanged. The consultant must be careful not to follow these recommendations

too strictly. Once the consultation begins, the consultant must be flexible enough to deal with those situations which confront him. Often the style of the group or individual as well as the style of the consultant will determine the structure of the process. Thus, it is important to keep this material in mind using it only when it seems appropriate.

Gebbie (1970) sees each consultation session as well as the entire process as divided into the three phases of trust building, working session, and closing and follow up. Similarly, Altrocchi et. al., (1965) see an introductory phase, warming up phase, problem focused phase, and an ending phase as part of the consultation process. Each researcher, although in different terms, identifies the same types of phases or stages as occurring. Using a much broader framework, Brown (1967) sees the overall consultative relationship in 5 phases (which overlap to some extent): observational, planning, contract-making, intervention, and evaluation.

In summary, consultation is a process which includes initiating and establishing a working relationship with the consultees, identification and working through of the problem areas, and some conclusions to the work accomplished. The latter phase may or may not involve some type of evaluation.

However, the stages or phases discussed above are really only the underlying structures of the consultation sessions. Consultation is more a process which the consultant leads the consultee through. As Signell and Scott (1971) state, the content of consultation is of less importance than the process. The role of the consultant should not be to convey material (a consultant is not a teacher or supervisor) but to indicate techniques the consultee can apply to accomplish the stated objectives. The process of consultation becomes all the more important when it is realized that during the consultation the consultant is trying to develop the skills of the consultee. This means that consultants are not conveying simple answers to very unique questions. Rather, the consultant is working on developing the collaborative skills of the consultees through careful analysis of circumstances and situations along with discussions and brainstormings of techniques which can be used to deal with a specific problem as well as future problems. Thus, the consultant is training the consultee to apply the conceptual framework of the project to problems he might confront in the future as well as those he faces in the present.

Consultation versus Supervision

Consultation is a learning process but at the same time it is distinct from a supervisory or teaching relationship. As Caplan (1954) stated, in a consultation situation the parties involved in the consultation are all specialists and professionals. All parties of the consultation are working together on developing alternative strategies for dealing with problem areas. This means that the consultant does not tell the consultee what he should or should not do -- instead he identifies for the consultee(s) the options available to him. In fact, the consultee(s) should assume an active role in this process of identifying options and strategies. Since consultation is more of a process as opposed to a means of conveying material, the working relationship, analysis of data, and sharing of suggestions becomes paramount. Further, the consultant, as an agent external to the organization, does not take responsibility for any action decided upon by the staff of that organization. The consultant is not supervising the consultees, rather he is helping them analyze their present situation and problems in an attempt to come up with alternative solutions.

Both Caplan (1954) and Bindman (1959) view the consultation process as distinct from the educational process. In making this distinction and comparison, Caplan (1954) points out that the educational process involves superior-subordinate relationships whereas consultation occurs among equals. Bindman (1959) lists a number of other differences between the two such as: who initiates the process -- in education it is from above, in consultation it is from the consultee; the length of involvement -- in education individuals are involved for long periods of time, in consultation work is limited to short periods; the professional background of those involved -- in consultation, the backgrounds of consultant-consultees are frequently different; and positions of administrative control -- education there is some administrative control, in consultation the consultant does not have administrative control over the consultee.

Group versus Individual Consultation

The approaches and processes utilized in mental health consultation have shifted as consultants have begun to deal with the problems in the system which the consultees or service providers are experiencing. One major force in this shift from client centered consultation to systems centered consultation is the development of group versus individualized consultation. Using the group structure, the focus of consultation meetings moved

from individual intrapsychic concerns to interactional problems or systems concerns.

In keeping with this development in the field, Signell and Scott (1971) discuss the use of the interaction model in consultation. The emphasis of the interaction model is to meet the needs in the mental health system by changing that system. As a result, there is minimal concern for dealing with the underlying emotions of the consultees and instead there is emphasis on the techniques used in bringing about system change. Interaction models, therefore, rely more heavily on a "problem solving", task-oriented tradition. This, of course, fits in rather neatly with group consultation. It is, in addition, similar to the approach taken in interagency collaboration consultation. Although the project's consultants are not necessarily working on system changes, they are dealing with interactional issues in a task related manner.

Group consultation is often very effective since discussion is centered on the problems resulting from interaction with other individuals and/or agencies and not on a consultee's individual problems. This technique is similar to Caplan's "second-hand" or implied method of discussion which occurs when the consultant and consultee discuss a third party. In this way, anxiety and tension are minimized. Discussions on interagency collaboration are not hindered by the group approach because the sessions stress the problems faced in interfacing with another agency and its staff. The consultee within the agency is only involved in the sense that he is experiencing collaboration difficulties and needs to develop strategies to deal with the problem. Further, with a number of people involved in the consultation more data is generated and more insight into the problem is available.

Thus, group consultation offers some advantages not afforded by the individual consultation setting. By making use of the group process, the consultant can foster an atmosphere conducive to the consultation process. Group consultation can be more efficient since the consultant has a broad range of data and input available. Furthermore, working in a group can lend group strength and support to the individual members. The influence of the group can be applied to individual participants to break down communication barriers. The group also develops it's own strength and cohesiveness which can be a carry-over once the consultation process ceases. Moreover, by the very nature of a group more people can be involved in the consultation both from within and outside the agency. Signell and Scott, (1971) Altocchi et. al. (1965) have found that group consultation

increases the communication, cohesiveness, and morale within the group and results in a greater sensitivity on the part of consultees to the dynamics of interpersonal relations.

Individual consultation differs slightly from group consultation in terms of content. Individual consultation provides a forum in which the individual's concerns and intrapsychic difficulties can be handled; these problems are not so readily dealt with in a group. As a result, individual consultation can more adequately handle the personal problems with the consultee is experiencing in the work environment. This distinction can often be used to its fullest advantage even if the normal structure of the consultation is a group. At times during a group consultation, it might become apparent to the consultant that one of the participants would benefit from being isolated from the group so that individual reservations and resistances in regard to certain problems can be handled. Some issues may be difficult to deal with in a group situation but might lend themselves very well to individual work. Dealing with an individual's problems on a one to one basis can facilitate the group process.

In summary, group consultation interspersed with some individual sessions can be a highly effective approach for dealing with the problem areas of an organization.

SOCIAL SYSTEM RELATEDNESS TECHNIQUES

Adapted, with permission, from Games Agencies Play; Enhancing Interagency Collaboration in Drug Rehabilitation, pp. 12-13, August, 1976. Interagency Collaboration Project, Bureau of Drug Rehabilitation, Virginia Department of Mental Health and Mental Retardation, Richmond, Va. This project was funded in part by Grant Number 75A3137 from the Virginia Division of Justice and Crime Prevention.

SOCIAL SYSTEM RELATEDNESS TECHNIQUES

TECHNIQUES

This refers to the specific behaviors used by staff in their contact with other agency personnel that may have an effect on interorganizational relationships.

INITIATING CONTACT

Initiation of contact occurs when an individual starts an interaction with another. It is important for staff to initiate contact with other agency personnel.

TYPES OF CONTACT

Types of contact refers to an individual's engagement in different forms of communication with others. The different forms of communication that one individual can utilize with others outside his agency include "shooting the bull" and face-to-face.

- "Shooting the bull" refers to a member of the staff contacting other agency personnel through informal means. This might include going to the person's office and just rapping, or it could be meeting with someone over lunch. It differs from face-to-face contact in that it is always informal.

- Face-to-face contact refers to the direct meeting between staff and agency personnel; it may be a formal meeting with many people, or a one-to-one interaction.

RESOURCE ACCESSIBILITY

Resource accessibility pertains to the ease with which clients, potential clients, or human service agency personnel are able to receive services and assistance from a drug rehabilitation program. This is an attempt by the drug rehabilitation program to increase the accessibility and availability of the organization and staff to the clients and referral-makers. Techniques to use include staff availability and sharing the patient.

- Staff Availability--The staff should be available for any interaction with agency personnel. There is always the need for an open channel of communication between staff and personnel from other agencies. The ability to move quickly and flexibly to meet other agency personnel at their time and place of convenience can be of importance to a successful interaction.

- Sharing the Client--Here the fact that the staff and the agency personnel have clients in common makes room for continued interaction. For example, if a probation and parole officer has a client who is a drug user and in a drug program, the fact that the drug program might help the client to staff off drugs and not break the law helps the officer to do his job.

that are specific to your job. You have a strong need to be seen as a professionally competent person by your fellow workers.

RELATEDNESS

Relatedness refers to an individual's becoming part of the social network including a sense of belonging or "we feeling" resulting from common experiences. Itis a state in which an individual is affiliated with other individuals or groups. For example, a sense of relatedness or belonging is felt when a group is working towards the same objectives; i.e., although you are just 35 years of age, you have been with this organization longer than any of your co-workers. One of the components of your job that you like is the sense of association you feel towards your job and its goals. It has always been important to you to feel a part of the group.

STATUS

Status if formed on the basis of socially ascribed prestige or honor. In behavioral terms, it involves deferential and respective behavior based on a ranking of positions according to comparable levels of prestige. An individual's need to be the object of deferential behavior we classified as a status need; i.e., as a person new to the organization, it is very important to you that people recognize your abilities and respect you for them. This respect is due you because of your tremendous job record and the efforts you have made in your new job.

SUPPORT

Support refers to a person's need for assistance or aid. It is an emotional response between two individuals involving such behaviors as spending time with another, expressing empathy and verbal support.

Relatedness differs from support in terms of the levels at which they apply. Support is more of an emotional response which two or more individuals share whereas relatedness is less emotional and personal since it involves an entire group; i.e., one reason you enjoy your job so much is that you really care about others and they are concerned about you. This support may be verbal or emotional. It is important for you to be assisted by others, not because you are not capable of handling the job alone but because your job responsibilities are so extensive.

TASK ATTAINMENT

Task attainment refers to the achievement or completion of assigned work or one's job. Individuals not only occupy positions in organizations but they also must complete their assigned tasks. Task attainment can involve efficiency and quality of performance. Each individual needs to derive some feeling of satisfaction of having done his job; i.e., because you have to work with so many different people and because your job responsibilities are so large, you have a strong desire to see the outcome of your work in order to obtain feedback. This is important to you because it is one of the avenues from which you derive satisfaction and pride in your job.

PROVISION OF EXPERTISE

This refers to the use of teaching, consulting, and other means by staff to impart to agency personnel relevant information to help the agency personnel improve his/her skills.

INSTILLATION OF COGNITIVE CLARITY REGARDING THE PROGRAM

This refers to the description of the program's function and operation for the agency personnel by the staff. It is assisting the agency personnel in gaining a clearer understanding of the program.

ROLE BEHAVIOR NEEDS

Adapted, with permission, from Games Agencies Play: Enhancing Interagency Collaboration in Drug Rehabilitation, pp. 10-11, August, 1976. Interagency Collaboration Project, Bureau of Drug Rehabilitation, Virginia Department of Mental Health and Mental Retardation, Richmond, Va. This project was funded in part by Grant Number 75A3137 from the Virginia Division of Justice and Crime Prevention.

ROLE BEHAVIOR NEEDS

CONTROL OF INFORMATION

An organization consists of people filling specified roles. The actions individuals make in the organizations are communicative acts or information exchanges. Communication can be viewed as the essence of a social system or an organization. Yet communication and information at random have no meaning; hence, the necessity of channeling the information so that it is easily accessible.

Control of information incorporates two ideas:

1. The desire to possess knowledge regarding what is occurring in an organization.

2. The need for a mechanism making it possible to obtain desired materials and information consistently and easily.

Means for information control include specifying channels of communication, memos, staff meetings, reports, professional literature, and so on, i.e., You have a need to determine that there is always the necessary financial support for the organizaton. You are very aware that having an appropriate amount of funds available enables you and your co-workers to do their job well.

FUNDING

The need for funds is a constant and very fundamental requirement of an organization. Without the necessary funds to support the organization it will not be able to continue operating, i.e., you have a need to determine that there is always the necessary financial support for the organization. You are very aware that having an appropriate amount of funds available enables you and your co-workers to do their job well.

POWER

Power is the ability to influence others directly for one's own ends. It implies the ability to wield coercive force--a possession of control and influence over others; i.e., one of the things you like about your job is the ability to control others for your own ends. This influence is not at all negative, but is useful, for you have certain skills and abilities which enable you to tactfully influence others.

PROFESSIONAL COMPETENCE

Professional competence refers to the specialized knowledge or skills which some individuals possess. One finds people attempting to acquire or develop professional skills and have these skills recognized by co-workers. These are behaviors going beyond simply completing a job or task to concern with completing it in a professional sense; i.e., this is your first year with this organization although you have had other jobs not as challenging. It is important for you to acquire the special skills

that are specific to your job. You have a strong need to be seen as a professionally competent person by your fellow workers.

RELATEDNESS

Relatedness refers to an individual's becoming part of the social network including a sense of belonging or "we feeling" resulting from common experiences. Itis a state in which an individual is affiliated with other individuals or groups. For example, a sense of relatedness or belonging is felt when a group is working towards the same objectives; i.e., although you are just 35 years of age, you have been with this organization longer than any of your co-workers. One of the components of your job that you like is the sense of association you feel towards your job and its goals. It has always been important to you to feel a part of the group.

STATUS

Status if formed on the basis of socially ascribed prestige or honor. In behavioral terms, it involves deferential and respective behavior based on a ranking of positions according to comparable levels of prestige. An individual's need to be the object of deferential behavior we classified as a status need; i.e., as a person new to the organization, it is very important to you that people recognize your abilities and respect you for them. This respect is due you because of your tremendous job record and the efforts you have made in your new job.

SUPPORT

Support refers to a person's need for assistance or aid. It is an emotional response between two individuals involving such behaviors as spending time with another, expressing empathy and verbal support.

Relatedness differs from support in terms of the levels at which they apply. Support is more of an emotional response which two or more individuals share whereas relatedness is less emotional and personal since it involves an entire group; i.e., one reason you enjoy your job so much is that you really care about others and they are concerned about you. This support may be verbal or emotional. It is important for you to be assisted by others, not because you are not capable of handling the job alone but because your job responsibilities are so extensive.

TASK ATTAINMENT

Task attainment refers to the achievement or completion of assigned work or one's job. Individuals not only occupy positions in organizations but they also must complete their assigned tasks. Task attainment can involve efficiency and quality of performance. Each individual needs to derive some feeling of satisfaction of having done his job; i.e., because you have to work with so many different people and because your job responsibilities are so large, you have a strong desire to see the outcome of your work in order to obtain feedback. This is important to you because it is one of the avenues from which you derive satisfaction and pride in your job.

NETWORKS: A KEY TO PERSON-COMMUNITY DEVELOPMENT

Office of Youth Development
Department of Health, Education, and Welfare
Denver Hearings 2/17/77

Anne W. Dosher, Ph.D.
Community Consultant

This unpublished article is reprinted with the permission of the author.

My starting point is the fundamental initial fact that each of us is perforce linked by all the material, organic and psychic strands of his being to all that surrounds him. Not only is he caught up in a network, he is carried along, too, by a stream. All around us, in whatever direction we look, there are both links and currents. We are all interconnected elements of one and the same curve that extends ahead of and reaches behind us.

Pierre Theilhard de Chardin
The Prayer of the Universe

The idea of network and networking is basic to those of us who have been working in communities and movements over the decades; for organizing is the process of bringing together various elements in order to develop a whole, a combination of nodes, (people, groups, organizations, systems) for a common purpose. We develop networks as ongoing organizations and carefully tend the three variables of:

a) nodes of the network (people, organizations, systems)

b) information flow (feelings, facts, data)

c) linkages (pathways for information).

We are all connected in networks of many kinds: family, peer, neighbors, workers, interest groups, associations, organizations. Some of these networks are grounded in our local community; others are placed in our memory and mind and are part of our non-spatial community.

Person-Family Networks: Every person today is embedded in a network of aligned, patterned family relationships. The pathways linking the persons may provide strong or weak bonds; the information flow may be static, toxic or healing; not every person can see or use all the possibilities. A net, however, is strong and flexible: teach the person to turn effectively on the net by reaching to the next person(s) and call along the pathways, and the whole actively becomes more than the sum of the parts; relationships change; healing and community occur.

One way to assist a person to make visible their network is to have them draw the total relational field of which they are a part: this usually has both space and time dimensions. A personal example follows (Figure I). A family network facilitator would attempt to bring the net together in order to develop the support system if a member of the net was in crisis. (Speck, Attneave: 1973).

Organizational network: When the person and family require care from the community, they reach out through the net of kin, peers, interest gorups and associations, into the community itself. Frequently, the small, indigenous community-based program is activating the net through neighborhood outreach programs. Person meets person and a connection is made. The program organizer then turns on the net of surrogate care which is needed to support the person and family in its search for problem solving skills, resources and community. Seldom are the resources contained within one program, and the organizer turns to the human service networks.

Interorganizational networks: The practice of creating networks followed the organic development of the small, indigenous, community-based agencies, clinics, hotlines and runaway houses during the sixties. Programs, faced with the requirement to grow in order to provide services and interact with the complex major systems of an unstable society in order to acquire resources, had to "clone" locally and find connections with others. Across communities, regions, states and the society, a system began developing which could maintain a separate reality and consensus and gain expertise in the face of growth and complexity.

Human service networks: These interorganizational, intersystem networks developed as ongoing organizations of people working together in a system of service that began to provide pathways for information about service technologies, services, resources, coordination and support systems. As networks, they are ongoing, process-oriented, member-supportive, decentralized learning systems, providing for: broad membership, continuous information flow, idea exchange, feedback, resource sharing and development, and boundary exchange with other networks. The list is not inclusive. A County example would be the Community Congress of San Diego, a network which I co-organized and for which I serve as Core Consultant. Other examples are: National Network of Runaway and Youth Services, National Council of Free Clinics, and the developing mutual support and self-help networks, such as: Parents Without Partners, Widow to Widow, Live Every Day. An interorganizational example follows (Figure 2).

Purpose, function and structure of networks

Purpose (the "why" of the network) is to develop a mediating mechanism which brings healing intervention between persons, families, groups, organizations, community and society, and learning which produces resources, capacity-building, ideas, innovations, diffusion systems and transcendence.

Functions (the activites of the network) are:

a) communication linkages and information channels for exchange of needs/resources

b) participant support systems and resource sharing

c) means for coordination, cooperation, collaboration, person/program actualization, training and capacity-building

d) means for collection action

Structure: (Figure 3 below)

A network is structure as above, with nodes, pathways and information. Roles essential to the design, creation, negotiation and management of networks

include: systems negotiator, underground manager, manoeuverer, broker, manager, facilitator, (Schon; 1971). Skills include: interpersonal communications, group dynamics, organization development and management, negotiation, mobilization, planning, change process conceptualization.

Relationships: The relationships between elements and systems, history and values, and organizational memory and funding are key issues for a network.

Elements and system:

> A network is a set of elements related to one another through multiple interconnections. The metaphor of the net suggests a special kind of interconnectedness, one dependent on nodes in which several connecting strands meet. There is the suggestion both of each element being connected to every other, and of elements connecting through one another rather than to each other through a center.....
>
> Donald Schon
> Beyond the Stable State

As Schon's description clearly states, one value of a network is its ability to support a practice which places value on person-centeredness and small units, valuing, problem solving and systems approaches. Due to the connections at the "node," the small unit may be valued, and due to rapid communication information flow, the whole may be comprehended.

History and values:

A network without a memory system (history, valuing, timing) cannot exist or plan to continue. In an inter-generational system (18 months to 2 years is the average "life" of most staff), the need to maintain histories and clear values as the foundation of an intergrated network becomes evident. Every person must become a historian and every organization identify the function in order to develop and maintain organizational and system memory. Values must be regularly clarified and confirmed if the purpose is to be carried out and congruence maintained between stated, structured and lived values. The flow of HISTORY-VALUES-PURPOSE-GOALS-OBJECTIVES-PROGRAM ACTIVITIES-IMPLEMENTATION/TIMELINE-EVALUATION-NEW IMAGE-PROACTIVE PLAN must be conceptualized as the cycle process continues.

Negotiation across the time worlds of clients, direct service, indirect service, community systems, and national guidance systems must occur: indeed, network members must know the differences if effecting planning is to occur.

As a result, training methods have been introduced into the networks: values processing, time worlds processing, network organizing.

Memory and funding:

Th short term (single year) funding practice of societal systems does not nurture a network. Rather, the practice destroys key foundations of history, values, time investments, structures, and functions. The community nurturing

system feeds in short, jerky, inadequate and shifting patterns leading to frustrations, pain, despair, and the outcry of persons, organizations and communities. The practice is one which should be reformed by public policy and revised in that most formal of all memory systems: Legislation and the Legislature.

Ten Guidelines for Networks: learning systems, support systems, and creators of the new. (This can be adopted for each level of social organization: person, family/group, organization, interorganizational field system).

1. DEVELOP A STATEMENT OF PURPOSE which is broad and generalizable in order to encompass many shades of value orientations under its rubric; for example:

> The Community Congress of San Diego has as its primary purpose the enhancement of community functioning at all levels of human life including those of individuals, groups, organizations, and the total San Diego community.

2. KNOW THYSELF. Know that the reason you are developing a network is to create a new reality which is closer to your shared vision of what should and could be. Cherish your vision, but articulate it pragmatically in long and short range goals, made operational by procedural objectives, and measurable outcomes.

3. FACE POWER ISSUES openly, squarely, and in timely fashion both internally in the network, and externally in the environment. A network of any dimension, from family to group to organization to major system, must be based on shared power and responsibility. This entails an extremely interactive model of relationship, in which interdependence is the value. The shared credit that comes with shared power is imparative if the cohesiveness so essential for viable network functioning is to be maintained.

4. GIVE PRIORITY TO INFORMATION PROCESSING. Successful interpersonal, group, and interorganizational communications are your energy sources. Cultivate, streamline, and maintain these flows through the channels of the networks.

5. IDENTIFY, TRAIN, AND NURTURE LEADERS at every node throughout the network. Continuously recruit persons from the interpersonal network, the staffs, and boards of agencies, and community members. The more conscious, motivated, and developed the persons who make up the network, the more diverse the roles and statuses represented in the network, the more powerful, cohesive, viable, and flexible the network will be.

6. IDENTIFY "BOUNDARY PERSONS." Every network needs people with the following skills: interpersonal communications, group dynamics, organization development and management, systems negotiation, mobilization, planning, change process conceptualization. Set up co-learning sessions and develop the depth of skills across the network.

7. CONCEPTUALIZE YOUR NETWORK AS A LEARNING SYSTEM: a process open to new learners, cherishing of the long-time learners, open to continous feedback from members and communities, able to capture and rationalize issues,

and flexible in order to bring ideas, innovations, and new models to bear on problems and issues of the moment. A network exists to create new knowledge.

8. STRESS MANAGEMENT, ACCOUNTABILITY, RESPONSIBILITY. Bad management, lack of accountability and irresponsible action will mar your credibility internally in the network, and externally in traditional systems. The network, while maintaining creativity, innovation, and rapid response, must be purer than the driven snow.

9. EVALUATE STRINGENTLY. Invent the models for appropriate evaluation of your work. As creators and innovators, you alone know best how to articulate, measure, and value your actions or projects in the world. Keep records in detailed and rational form against your own defensible models.

If you do not, the traditional system, or your funding sources will estimate your worth against inappropriate measures. Concern for the valuing process equals survival and provides a basis for proactive planning.

10. CELEBRATE AND TREASURE THE PAYOFFS provided by your network efforts: new relationships, a sense of community among dedicated fellow members, cooperation instead of competition, economics of love, new setting development, information processing, policy changes...new meanings for ways of being in the world.

Visions for the Future.

What, you may ask, is new about any of this? The "new" comes, first, from the necessity for every person to be trained today in the art of selfconscious networking in order to learn new behavior leading to systematized, more effective interactions with social networks in private, communal, and societal life.

Second, when a person acts with others to create community (which represents common values), then the qualities though which both that person and that community develops are identical: freedom, power, and community. The ethics of the person are characterized by discipline, responsibility, and obligation, and motivated by personal choice which leads to participation and praxis. In turn, the developed community grounds personal action, self fulfillment, individual opportunity, and styles of life through the provision of institutional opportunity structures characterized by: Openness, ordered and accessible, richness, sufficient and diverse; person centeredness, authentic and integrating; and freedom, flexible, voluntary and controllable. (Haworth: 1966).

Third, when societal guidance systems such as the Office of Youth Development develop and support community network mechanisms which mediate between the person and society, that national system should also always refer to the first and basic moral criteria which could lead the system to allocate nurturing vs depriving, loving vs fearful resources--in intent, purpose, or method.

What is very old, but which must be made new again in the consciousness of all persons, is the knowledge that, in order to develop young persons subjectively through employment, socialization, education, training, or treatment, we must provide an objective reality which grounds the person in the real community (for example, provides roles, statuses, skills, jobs, resources), and

confirms the person in the society. Networks are keys which can help accomplish this goal: the networks of persons, groups, organizations, communities, and systems; and, the networks in our minds and visions.

MODULE VII

MODULE VII: TARGETING PROGRAMS FOR SPECIAL POPULATIONS **TIME:** 3 HOURS 40 MINUTES

GOALS

- To provide participants with the opportunity to explore program options for target populations that are relevant to their program and/or community needs
- To give special consideration to cross-cultural issues and implications for the prevention of drug abuse.

OBJECTIVES

At the end of this Module, participants will be able to:

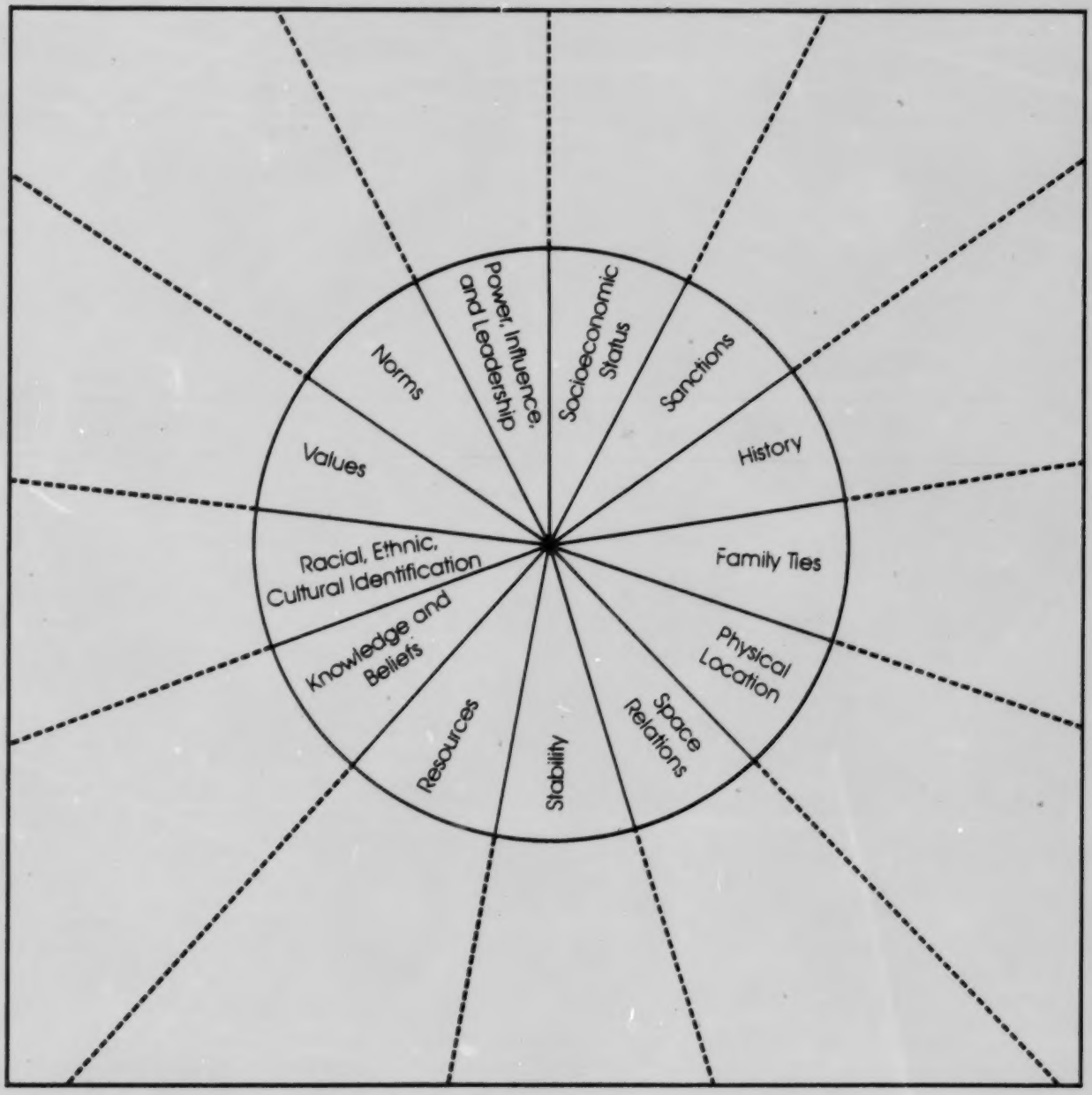
- Describe a pilot prevention program for a specific target population of their choice developed by a team effort in which they participated
- Identify at least five cultural issues which need to be considered when developing programs for special populations.

MATERIALS

- Newsprint
- Magic Markers
- Paper and Pencils
- Participant Manual
- Worksheets
- Reference Sheets

MODULE VII	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. INTRODUCTION	5 MINUTES	LARGE-GROUP LECTURE
2. DESIGNING A PILOT PREVENTION PROGRAM	25 MINUTES	SMALL-GROUP EXERCISE
3. STEP ONE: DEVELOPING THE PROBLEM STATEMENT	1 HOUR	INDIVIDUAL AND SMALL-GROUP EXERCISE
4. STEP TWO: DEVELOPING PROGRAM GOALS	30 MINUTES	SMALL-GROUP
5. STEP THREE: DEVELOPING PROGRAM OBJECTIVES	30 MINUTES	SMALL-GROUP EXERCISE
6. REPORT OUT	1 HOUR	SMALL-GROUP AND LARGE-GROUP DISCUSSION
7. WRAP-UP	10 MINUTES	LARGE-GROUP LECTURE

CMA Social Compass



Adapted from Conner, Desmond M.: Understanding Your Community. Ottawa: Development Press, 1969.

"WHAT DO WE REALLY KNOW"

1. Facts (I know.....)

2. Opinions (It seems to me that.....)

3. Assumptions (Well, everyone knows that.....)

QUESTIONS FOR FURTHER RESEARCH

ISSUE	POSSIBLE ASSESSMENT STRATEGY	POTENTIAL RESOURCE PERSON/ACTIVITY
1.		
2.		
3.		

PROGRAM PLANNING

PROBLEM STATEMENT: State what the problem is, to whom, and for what reason. Cite any evidence or indicators which support your statement.

GOAL STATEMENT: State the long-term end-result desired.

WORKSHEET VII-4 Continued

PROGRAM ACTIVITY: Use one page for every program activity. Each activity should contribute to the accomplishment of one or more objectives. Describe the activity:

This activity related to objective(s) _____

TASKS: In order to implement the activity, the following tasks must be completed.

WHAT WILL BE DONE (in chronological sequence)	TO/WITH WHOM	BY WHOM	WITH WHAT RESOURCES	BY WHEN	WHEN DONE

WORKSHEET VII-4 Continued

OBJECTIVES: List and number all the short-term and end-results or outcomes desired. Each objective should logically contribute to the accomplishment of your GOAL. Objectives should be: (1) concrete and specific; (2) realistic and attainable; (3) time-limited; and (4) measurable. (How will you know the objective is achieved?)

EVALUATIVE QUESTIONS WHICH NEED TO BE ANSWERED	POSSIBLE METHODS FOR ANSWERING THEM	IS DATA NOW READILY AVAILABLE?	IF NOT, CAN IT BE MADE AVAILABLE?

SPECIAL TARGET POPULATIONS

- Asians/Pacific Islanders
- Blacks
- Chicanos
- Gays
- Handicapped
- Elderly
- Industry
- Low-Income Groups
- Native Americans
- Puerto Ricans
- Rural Populations
- Schools
- Women
- Youth

MODULE VIII

MODULE VIII: RESOURCE DEVELOPMENT AND GRANTSMANSHIP **TIME:** 7 HOURS 15 MINUTES

GOALS

- To provide participants with information about fund-raising
- To teach participants from both local and national sources how to use the appropriate resources as they try to obtain support
- To help participants formulate funding strategies for their prevention programs.

OBJECTIVES

At the end of this Module, participants will be able to:

- Identify at least two criteria for eligibility that any private organization should meet before attempting to secure funds from a private or public source
- Identify at least five pieces of pertinent information about a foundation or a government agency before they attempt to solicit funds
- Identify at least three reasons for a support base to be developed for a prevention program
- Identify at least seven categories that should be covered by any proposal.

MATERIALS

- Newsprint
- Magic Markers
- Tape
- Participant Manuals
- Reference Sheets
- Selected Readings

MODULE VIII	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. OVERVIEW	15 MINUTES	LARGE-GROUP LECTURE
2. SIMULATION	1 HOUR	SMALL-GROUP EXERCISE
3. WIN AS MUCH AS YOU CAN	30 MINUTES	OCTETS/DYADS EXERCISE
4. FUNDING RESOURCES	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
5. SECURING LOCAL FUNDS AND OTHER NON-FINANCIAL SUPPORT	1 HOUR	LARGE-GROUP LECTURE/DISCUSSION
6. GUIDELINES FOR SECURING FINANCIAL SUPPORT	3 HOURS	LARGE-GROUP LECTURE/DISCUSSION
7. FUND-RAISING CLINIC	45 MINUTES	SMALL-GROUP EXERCISE
8. BASIC COMPONENTS OF AN EFFECTIVE GRANT PROPOSAL	15 MINUTES	LARGE-GROUP LECTURE
9. WRAP-UP	15 MINUTES	LARGE-GROUP LECTURE

WIN AS MUCH AS YOU CAN TALLY SHEET*

Instructions: For ten successive rounds you and your partner will choose either an X or a Y. Each round's playoff depends on the pattern of choices made in your cluster.

PAYOFF SCHEDULE

4 X's: Lose $1.00 each
3 X's: Win $1.00 each 1 Y: Lose $3.00 each
2 X's: Win $2.00 each 2 Y's: Lose $2.00 each
1 X: Win $3.00 each 3 Y's: Lose $1.00 each
4 Y's: Win $1.00 each

You are to confer with your partner in each round and make a joint decision. In rounds 5, 8, and 10 you and your partner may first confer with the other dyads in your cluster before making your joint decision, as before.

SCORECARD

	Round	Your Choice	Pattern of Cluster's	Payoff	Balance
	1	X Y	__X __Y		
	2	X Y	__X __Y		
	3	X Y	__X __Y		
	4	X Y	__X __Y		
Bonus Round: Playoff x 3	5	X Y	__X __Y		
	6	X Y	__X __Y		
	7	X Y	__X __Y		
Round Playoff x 5	8	X Y	__X __Y		
	9	X Y	__X __Y		
Bonus Round: Payoff x 10	10	X Y	__X __Y		

Reproduced from A Handbook of Structured Experiences for Human Relations Training, Volume II (Revised), J. William Pfeiffer and John E. Jones, Editors, La Jolla, California, University Associates, Publishers and Consultants, 1974.

NEEDS/SOURCES CHART Program Needs	Public & Private Agencies	Fraternal & Civic Organizations	Industry	Business	Unions	Community People	Local Government	CETA	Title XX	Foundations	Other
Money $_____one-time only _____periodically _____annually											
Facilities (type of space/where to locate) _____ _____											
Equipment Type: Desks #_____ Chairs #_____ Typewriter #_____ Etc. _____											
Access to equip. (to use at no or reduced cost) Duplicating _____ Graphic Arts _____											
Consumable Supplies Paper #_____ Pens #_____ Typ. Ribbons_____ Etc._____											
Manpower/Time Needed "Experts" Evaluators _____ Counselors _____ Media Sp. _____ Etc. _____ Clerical _____ No Special Skills _____											
Professional Products Printed Brochures_____ Artwork for Media_____ Etc. _____											

EXCERPTS FROM CATALOG OF FEDERAL DOMESTIC ASSISTANCE

This material is excerpted from the Catalog of Federal Domestic Assistance, Executive Office of the President, Office of Management and Budget, The Government Printing Office, Washington, D.C.

AGENCY PROGRAM INDEX

The alphabet(s) in parentheses following the program title, shows the type(s) of assistance available through that program. The alphabet codes with accompanying types of assistance are as follows: A—Formula Grants; B—Project Grants; C—Direct Payments for Specified Use; D—Direct Payments with Unrestricted Use; E—Direct Loans; F—Guaranteed/Insured Loans; G—Insurance; H—Sale, Exchange, or Donation of Property and Goods; I—Use of Property, Facilities, and Equipment; J—Provision of Specialized Services; K—Advisory Services and Counseling; L—Dissemination of Technical Information; M—Training; N—Investigation of Complaints; O—Federal Employment; P—Research Contracts.

DEPARTMENT OF AGRICULTURE

ANIMAL AND PLANT HEALTH INSPECTION SERVICE

10.025 Plant and Animal Disease and Pest Control (J,L)

AGRICULTURAL STABILIZATION AND CONSERVATION SERVICE

10.051 Commodity Loans and Purchases (D,E)
10.052 Cotton Production Stabilization (D)
10.053 Dairy Indemnity Payments (D)
10.054 Emergency Conservation Program (B)
10.055 Feed Grain Production Stabilization (D)
10.056 Storage Facilities and Equipment Loans (E)
10.058 Wheat Production Stabilization (D)
10.059 National Wool Act Payments (D)
10.060 Beekeeper Indemnity Payments (D)
10.062 Water Bank Program (B,K)
10.063 Agricultural Conservation Program (B)
10.064 Forestry Incentives Program (B)
10.065 Rice Production Stabilization (D)
10.066 Emergency Feed Program (D)
10.067 Grain Reserve Program (D)

AGRICULTURAL MARKETING SERVICE

10.150 Agricultural Product Grading (J)
10.153 Market News (L)
10.154 Market Supervision (J,K,M,N)
10.155 Marketing Agreements and Orders (J,K)
10.156 Federal—State Marketing Improvement Program (B)
10.159 Livestock and Poultry Market Supervision (N)

ECONOMICS, STATISTICS, AND COOPERATIVES SERVICE

10.250 Agricultural and Rural Economic Research (L)
10.251 Technical Assistance to Cooperatives (K,L)
10.252 Agricultural Statistical Reports (L)

FARMERS HOME ADMINISTRATION

10.404 Emergency Loans (F)
10.405 Farm Labor Housing Loans and Grants (B,F)
10.406 Farm Operating Loans (F)
10.407 Farm Ownership Loans (F)
10.408 Grazing Association Loans (F)
10.409 Irrigation, Drainage, and Other Soil and Water Conservation Loans (F)
10.410 Low to Moderate Income Housing Loans (F)
10.411 Rural Housing Site Loans (E,F)
10.413 Recreation Facility Loans (F)
10.414 Resource Conservation and Development Loans (F)
10.415 Rural Rental Housing Loans (F)
10.416 Soil and Water Loans (F)
10.417 Very Low—Income Housing Repair Loans and Grants (B,E)
10.418 Water and Waste Disposal Systems for Rural Communities (B,F)
10.419 Watersned Protection and Flood Prevention Loans (F)
10.420 Rural Self—Help Housing Technical Assistance (B)
10.421 Indian Tribes and Tribal Corporation Loans (F)
10.422 Business and Industrial Loans (F)
10.423 Community Facilities Loans (F)
10.424 Industrial Development Grants (B)
10.425 Emergency Livestock Loans (F)
10.426 Area Development Assistance Planning Grants (B)
10.427 Rural Rental Assistance Payments (C)
10.428 Economic Emergency Loans (F)
10.429 Above Moderate Income Housing Loans (F)

FEDERAL CROP INSURANCE CORPORATION

10.450 Crop Insurance (G)

FOOD SAFETY AND QUALITY SERVICE

10.475 Assistance to States for Intrastate Meat and Poultry Inspection (B)
10.476 Egg Products Inspection (J)
10.477 Meat and Poultry Inspection (J)
10.478 Voluntary Commodity Inspection and Grading Programs (J)

FOOD AND NUTRITION SERVICE

10.550 Food Distribution (A,H)
10.551 Food Stamps (C)
10.553 School Breakfast Program (A,H)
10.554 Equipment Assistance for School Food Service Programs (A)
10.555 National School Lunch Program (A,H)
10.556 Special Milk Program for Children (A)
10.557 Special Supplemental Food Program for Women, Infants, and Children (B)
10.558 Child Care Food Program (A,H)
10.559 Summer Food Service Program for Children (A,H)
10.560 State Administrative Expenses for Child Nutrition (A)
10.561 State Administrative Matching Grants for Food Stamp Program (A)
10.563 Nutrition Education Experimental or Demonstration Projects (B)
10.564 Nutrition Education and Training Program (A)

FOREST SERVICE

10.652 Forestry Research (B)
10.661 Youth Conservation Corps—Grants to States (B)
10.663 Young Adult Conservation Corps—Grants to States (B)
10.664 Cooperative Forestry Assistance (A,B)

RURAL ELECTRIFICATION ADMINISTRATION

10.850 Rural Electrification Loans and Loan Guarantees (F)
10.851 Rural Telephone Loans and Loan Guarantees (F)
10.852 Rural Telephone Bank Loans (E)

SCIENCE AND EDUCATION ADMINISTRATION

10.875 Agricultural Research—Basic and Applied Research (B,L)
10.876 Grants for Agricultural Research, Special Research Grants (B)
10.877 Cooperative Forestry Research (A)
10.878 Payments to Agricultural Experiment Stations Under Hatch Act (A)
10.879 Rural Development Research (A)
10.880 Payments to 1890 Land-Grant Colleges and Tuskegee Institute (A)
10.881 Cooperative Extension Service (A)
10.882 Higher Education—Land—Grant Colleges and Universities (A)
10.883 Technical Information Systems (I)
10.884 Grants for Agricultural Research—Competitive Research—Grants (B)

SOIL CONSERVATION SERVICE

10.900 Great Plains Conservation (C,K)

10.901 Resource Conservation and Development (B,K)
10.902 Soil and Water Conservation (K)
10.903 Soil Survey (L)
10.904 Watershed Protection and Flood Prevention (B,K)
10.905 Plant Materials for Conservation (H)
10.906 River Basin Surveys and Investigations (J,K)
10.907 Snow Survey and Water Supply Forecasting (L)
10.908 Inventory and Monitoring (L)
10.909 Resource Appraisal and Program Development (B,L)

DEPARTMENT OF COMMERCE

BUREAU OF THE CENSUS

11.001 Census and Statistical Reports (L)
11.002 Census Data User Services (J,K,L)
11.003 Census Geography (J,L)
11.004 Census Intergovernmental Services (K,L,M)
11.005 Census Special Tabulations and Services (J,L)
11.006 Personal Census Search (J)

BUREAU OF ECONOMIC ANALYSIS

11.025 Measures and Analyses of the U.S. Economy (L)

INDUSTRY AND TRADE ADMINISTRATION

11.100 Export Licensing Service and Information (K,L)
11.101 Export Trade Promotion (K,L)
11.103 International Commercial Information (K,L)
11.104 Business Assistance, Services, and Information (K,L)
11.105 Importation of Duty—Free Educational and Scientific Materials (J)

ECONOMIC DEVELOPMENT ADMINISTRATION

11.300 Economic Development—Grants and Loans for Public Works and Development Facilities (B,E)
11.301 Economic Development—Business Development Assistance (E,F)
11.302 Economic Development—Support for Planning Organizations (B)
11.303 Economic Development—Technical Assistance (B,L)
11.304 Economic Development—Public Works Impact Projects (B)
11.305 Economic Development—State and Local Economic Development Planning (B)
11.306 Economic Development—District Operational Assistance (B)
11.307 Special Economic Development and Adjustment Assistance Program—Long-Term Economic Deterioration (B)
11.308 Grants to States for Supplemental and Basic Funding of Titles I, II, III, IV and IX Activities (B,E)
11.309 Trade Adjustment Assistance (E,F,L)
11.311 Special Economic Development and Adjustment Assistance Program—Sudden and Severe Economic Dislocation (B)

NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION

11.400 Geodetic Surveys and Services (J,K,L)
11.401 Nautical Charts and Related Data (J,K,L)
11.405 Anadromous and Great Lakes Fisheries Conservation (B)
11.406 Commercial Fisheries Disaster Assistance (B)
11.407 Commercial Fisheries Research and Development (A)
11.410 Fishermen—Reimbursement of Losses (G)
11.411 Fishery Cooperative Services (K,L)
11.413 Fishery Products Inspection and Certification (J)
11.415 Fishing Vessel Obligation Guarantees (F)
11.417 Sea Grant Support (B)
11.418 Coastal Zone Management Program Development (B)
11.419 Coastal Zone Management Program Administration (B)
11.420 Coastal Zone Management Estuarine Sanctuaries (B)
11.421 Coastal Energy Impact Program—Formula Grants (A)
11.422 Coastal Energy Impact Program—Planning Grants (B)
11.423 Coastal Energy Impact Program—Loans and Guarantees (E)
11.424 Coastal Energy Impact Program—Environmental Grants (B)

MARITIME ADMINISTRATION

11.500 Construction—Differential Subsidies (C)
11.501 Development and Promotion of Ports and Intermodal Transportation (K,L)
11.502 Federal Ship Financing Guarantees (F)
11.503 Maritime War Risk Insurance (G)
11.504 Operating—Differential Subsidies (C)
11.505 Ship Sales (H)
11.506 State Marine Schools (A,I)
11.507 U.S. Merchant Marine Academy (M)
11.508 Capital Construction Fund (C)
11.509 Development and Promotion of Domestic Waterborne Transport Systems (K,L)

NATIONAL TELECOMMUNICATIONS AND INFORMATION ADMINISTRATION

11.550 Public Telecommunications Facilities (B)

NATIONAL BUREAU OF STANDARDS

11.601 Calibration and Testing Services (L)
11.603 National Standard Reference Data System (L)
11.604 Standard Reference Materials (L)
11.606 Weights and Measures Service (K,L,M)

NATIONAL TECHNICAL INFORMATION SERVICE

11.650 National Technical Information Service (L)

OFFICE OF MINORITY BUSINESS ENTERPRISE

11.800 Minority Business Development—Management and Technical Assistance (B,P)

PATENT AND TRADEMARK OFFICE

11.900 Patent and Trademark Technical Information Dissemination (L)

UNITED STATES TRAVEL SERVICE

11.951 Matching Funds (B)

DEPARTMENT OF DEFENSE

DEFENSE LOGISTICS AGENCY

12.001 Industrial Equipment Loans to Educational Institutions (I)

DEPARTMENT OF THE ARMY, OFFICE OF THE CHIEF OF ENGINEERS

12.100 Aquatic Plant Control (J,L)
12.101 Beach Erosion Control Projects (J)
12.102 Flood Control Works and Federally Authorized Coastal Protection Works, Rehabilitation (J)
12.103 Flood Fighting and Rescue Operations, and Emergency Protection of Coastal Protective Works Federally Authorized (J)
12.104 Flood Plain Management Services (K,L)
12.105 Protection of Essential Highways, Highway Bridge Approaches, and Public Works (J)
12.106 Flood Control Projects (J)
12.107 Navigation Projects (J)
12.108 Snagging and Clearing for Flood Control (J)
12.109 Protection, Clearing and Straightening Channels (J)
12.110 Planning Assistance to States (J)

DEFENSE CIVIL PREPAREDNESS AGENCY

12.309 Civil Defense—Industrial Participation (L,M)
12.310 Civil Defense—Radiological Systems Maintenance and Training of Radiological Personnel (B,J)
12.312 Civil Defense—National Shelter Survey (J)
12.314 Civil Defense—Staff College (B,M)

12.315 Civil Defense—State and Local Management (A)
12.316 Civil Defense—Radiation Shielding Design (K)
12.319 Civil Defense—State and Local Maintenance and Services (B)
12.321 Civil Defense—State and Local Supporting Materials (B)
12.322 Civil Defense—Contributions Project Loan Program (I)
12.324 Civil Defense—Architect/Engineer Student Development (M)

DEPARTMENT OF THE ARMY, NATIONAL GUARD BUREAU

12.400 Military Construction, Army National Guard (B)

U.S. SOLDIERS' AND AIRMEN'S HOME

12.500 U.S. Soldiers' and Airmen's Home (J)

OFFICE OF THE ASSISTANT SECRETARY (INSTALLATIONS AND LOGISTICS)

12.600 Community Economic Adjustment (J,K)

SECRETARIES OF MILITARY DEPARTMENTS

12.700 Donations/Loans of DOD Surplus Property (H)

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

PUBLIC HEALTH SERVICE—I (For Part II and III of Public Health Service, turn over a few pages)

13.103 Food and Drug Administration—Research (B,P)
13.210 Comprehensive Public Health Services—Formula Grants (A)
13.211 Crippled Children's Services (A,B)
13.217 Family Planning Projects (B)
13.220 Medical Facilities Construction—Formula Grants (A)
13.224 Community Health Centers (B)
13.226 Health Services Research and Development—Grants and Contracts (B,P)
13.227 Health Statistics Training and Technical Assistance (K,M)
13.228 Indian Health Services—Health Management Development Program (B)
13.229 Indian Health Services—Sanitation Management Development Program (B)
13.231 Maternal and Child Health Research (B)
13.232 Maternal and Child Health Services (A,B)
13.233 Maternal and Child Health Training (B)
13.235 Drug Abuse Community Service Programs (B)
13.237 Mental Health—Hospital Improvement Grants (B)
13.238 Mental Health—Hospital Staff Development Grants (B)
13.242 Mental Health Research Grants (B)
13.243 Alcohol, Drug Abuse, and Mental Health Administration Scientific Communications and Public Education (L)
13.244 Mental Health Clinical or Service Related Training Grants (B)
13.246 Migrant Health Grants (B)
13.252 Alcoholism Treatment and Rehabilitation/Occupational Alcoholism Services Programs (B)
13.253 Medical Facilities Construction—Loans and Loan Guarantees (E,F)
13.254 Drug Abuse Demonstration Programs (B)
13.256 Health Maintenance Organizations (B,E)
13.257 Alcohol Formula Grants (A)
13.258 National Health Service Corps (J)
13.259 Mental Health—Children's Services (B)
13.260 Family Planning Services—Training Grants and Contracts (B,P)
13.262 Occupational Safety and Health Research Grants (B)
13.263 Occupational Safety and Health—Training Grants (B)
13.266 Childhood Lead—Based Paint Poisoning Prevention (B)
13.267 Urban Rat Control (B)
13.268 Disease Control—Project Grants (B)
13.269 Drug Abuse Prevention Formula Grants (A)
13.271 Alcohol Research Scientist Development and Research Scientist Awards (B)
13.272 Alcohol National Research Service Awards for Research Training (B)
13.273 Alcohol Research Programs (B,P)
13.274 Alcohol Clinical or Service Related Training Programs (B)
13.275 Drug Abuse Education Programs (B)
13.277 Drug Abuse Research Scientist Development and Research Scientist Awards (B)
13.278 Drug Abuse National Research Service Awards for Research Training (B)
13.279 Drug Abuse Research Programs (B,P)
13.280 Drug Abuse Clinical or Service Related Training Programs (B)
13.281 Mental Health Research Scientist Development and Research Scientist Awards (B)
13.282 Mental Health National Research Service Awards for Research Training (B)
13.283 Center for Disease Control—Investigations, and Technical Assistance (J,K,L,M)
13.284 Emergency Medical Services (B)
13.287 Grants for Training in Emergency Medical Services (B)
13.288 National Health Service Corps Scholarship Program (B)
13.289 President's Council on Physical Fitness and Sports (J,K,L,M)
13.290 Special Alcoholism Projects to Implement the Uniform Act (B)
13.292 Sudden Infant Death Syndrome Information and Counseling Program (B)
13.293 State Health Planning and Development Agencies (B)
13.294 Health Planning—Health Systems Agencies (B)
13.295 Community Mental Health Centers—Comprehensive Services Support (B)
13.296 Comprehensive Hemophilia Diagnostic and Treatment Centers (B)
13.297 National Research Service Awards (B)
13.298 Nurse Practitioner Training Program and Nurse Practitioner Traineeships (B)
13.299 Advanced Nurse Training Program (B)
13.306 Laboratory Animal Sciences and Primate Research (B,P)
13.319 Dental Team Practice (B)
13.333 Clinical Research (B,P)
13.337 Biomedical Research Support (B)
13.339 Health Professions—Capitation Grants (B)
13.342 Health Professions—Student Loans (B)
13.358 Professional Nurse Traineeships (B)
13.359 Nurse Training Improvement—Special Projects (B)
13.361 Nursing Research Project Grants (B)
13.363 Nursing Scholarships (B)
13.364 Nursing Student Loans (B)
13.371 Biotechnology Research (B,P)
13.375 Minority Biomedical Support (B)
13.379 Grants for Graduate Training in Family Medicine (B)
13.381 Health Professions—Financial Distress Grants (B)
13.384 Health Professions—Start-Up—Assistance (B)
13.386 Nursing Capitation Grants (B)
13.392 Cancer—Construction (B)
13.393 Cancer Cause and Prevention Research (B,P)
13.394 Cancer Detection and Diagnosis Research (B,P)
13.395 Cancer Treatment Research (B,P)
13.396 Cancer Biology Research (B,P)
13.397 Cancer Centers Support (B)
13.398 Cancer Research Manpower (B)
13.399 Cancer Control (B,P)

OFFICE OF EDUCATION

13.400 Adult Education—Grants to States (A)
13.403 Bilingual Education (A,B,P)
13.405 Civil Rights Technical Assistance and Training (B)
13.406 College Library Resources (B)

APPLICATION AND AWARD PROCESS:

Preapplication Coordination: The standard application forms as furnished by the Federal agency and required by OMB Circular No. A-102 must be used for this program. Applications are subject to State and areawide clearinghouses review pursuant to procedures in Part I, Attachment A of OMB Circular No. A-95 (revised).

Application Procedure: The standard application forms as furnished by the Federal agency and required by OMB Circular No. A-102 must be used for this program. Applications should be submitted to the Regional Health Administrator.

Award Procedure: After approval by the Regional Health Administrator, the regional grants management office prepares a notice of award, secures necessary clearances and approval signatures, issues the award, and enters the approved award in the grant payment process and provides notification of the grant approval to the public. Notification of grant award must be made to the designated State Central Information Reception Agency in accordance with Treasury Circular 1082.

Deadlines: Applications should be submitted 5 months prior to beginning date of period for which funds are requested.

Range of Approval/Disapproval Time: 12 to 20 weeks.

Appeals: None.

Renewals: Same as Application Procedure.

ASSISTANCE CONSIDERATIONS:

Formula and Matching Requirements: While there are no specific matching requirements, applicants must assume part of the project costs.

Length and Time Phasing of Assistance: Project period - variable; Budget period - 12 months.

POST ASSISTANCE REQUIREMENTS:

Reports: Progress, status, and narrative reports as required by individual programs. Financial status reports are required no later than 90 days after the end of each specified reporting period. Final Financial status and progress reports are required 90 days after the end of the project period.

Audits: Grants subject to inspection and audit by representatives of HEW to determine, at a minimum, the fiscal integrity of financial transactions and reports and compliance with laws, regulations and administrative requirements.

Records: Financial records, supporting documents, statistical records, and all other records pertinent to the grant program shall be retained for a minimum period of 3 years, or until completion and resolution of any audit in process or pending resolution. In all cases records must be retained until resolution of any audit questions. Property records must be retained in accordance with PHS Grants Policy Statement requirement.

FINANCIAL INFORMATION:

Account Identification: 75-0943-0-1-550.

Obligations: (Grants) FY 78 $61,400,000; FY 79 est $82,000,000; and FY 80 est $65,532,000.

Range and Average of Financial Assistance: $17,043 to $2,461,000; $352,900.

PROGRAM ACCOMPLISHMENTS: In fiscal year 1978, 174 grants were awarded in the amount of $61,400,000; $32,000,000 for venereal diseases and $23,000,000 for children immunization and $5,100,000 for Influenza Immunization The Grants are awarded to official health agencies which serve all areas of the Nation. Immunization grants will continue to assist recipients in developing and refining their capabilities in carrying out comprehensive immunization programs for poliomyelitis, measles, mumps, rubella, diphtheria, pertussis, and tetanus. In Gonorrhea screening during 1978, 8.5 million specimens from women were tested with 397,400 (4.7 percent) found positive. Total Gonorrhea control activities resulted in preventing an estimated 201,700 cases of gonorrhea and 5,400 cases of Syphillis. In fiscal year 1978, 177 applications were received.

REGULATIONS, GUIDELINES, AND LITERATURE: Guidelines are Available. Regulations are being prepared. PHS Grants Policy Statement No. (OS) 77-50,000, October 1, 1976. (revised).

INFORMATION CONTACTS:

Regional or Local Office: Each Regional Health Administrator of the HEW Regional Offices is responsible for the administration of this program. (See appendix for a list of regional offices.)

Headquarters Office: Dr. William H. Foege, Director, Center for Disease Control, PHS, DHEW, 1600 Clifton Rd. N.E., Atlanta, GA 30333. Telephone: (404) 329-3291.

RELATED PROGRAMS: 13.210, Comprehensive Public Health Services - Formula Grants; 13.217, Family Planning Projects; 13.224, Community Health Centers; 13.228, Indian Health Services-Health Management Development Program; 13.232, Maternal and Child Health Services; 13.246, Migrant Health Grants; 13.258, National Health Service Corps; 13.266, Childhood Lead-Based Paint Poisoning Control; 13.267, Urban Rat Control; 13.283, Center for Disease Control - Investigations, and Technical Assistance; 13.293, State Health Planning and Development Agencies; 13.600, Administration for Children, Youth and Families-Head Start; 13.642, Social Services for Low Income and Public Assistance Recipients.

EXAMPLES OF FUNDED PROJECTS: The majority of official State Health Departments (California, Michigan, Texas, etc.), and many large local health departments (New York, Chicago, Los Angeles, etc.), have ongoing disease control programs utilizing these grants. DISEASE CONTROL PROJECT GRANTS - Immunization - The immunization initiative objective is to attain immunization levels of at least 90 percent in children under 15 years of age. Reaching this objective requires the existence in each State and/or project area of an effective comprehensive immunization program assuring the benefits of immunization to all children in the area. In order to ensure an effective comprehensive program, all projects conduct the initial elements: Assessment of immunization status (all children K-12, 2- year-old children, children in special preschool populations, and children under 5 served in public clinics); surveillance preventable disease; delivery of immunization services; information and education programs; consistent enforcement of compulsory school immunization laws, participation of citizen groups and the use of volunteers. Influenza - The objective of the influenza immunization program is to raise the level of protection of the high-risk population by increasing the availability of influenza immunization services provided by the public sector. Reaching this objective requires the existence in each State and/or project area of an effective program to assure provision of influenza vaccinations to high-risk populations through the public sector through joint planning with public health and private providers, senior citizens' groups, appropriate chronic disease associations, medical groups, State and local governments, entities and volunteer groups; information and education programs, and surveillance activities to detect and report influenza cases. Veneral Diseases - Veneral disease project funds supplement the detection and prevention components of the veneral disease control efforts of State and local government agencies. Activities include reporting, screening, casefinding and case followup activities, interstate epidemiologic referral, and education activities. The provision of diagnostic/treatment services for veneral diseases are not normally supported by project funds and are considereed the responsibility of the grantee organization.

CRITERIA FOR SELECTING PROPOSALS: Criteria include the extent of the disease problem in the applicant's area, the extent to which an applicant's proposed program is designed to reduce the problem, and the capacity of the applicant to make effective use of federal grant funds.

13.269 DRUG ABUSE PREVENTION FORMULA GRANTS

(Drug Formula Grants)

FEDERAL AGENCY: ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION, PUBLIC HEALTH SERVICE, DEPARTMENT OF HEALTH, EDUCATION AND WELFARE

AUTHORIZATION: Drug Abuse Office and Treatment Act of 1972, Public Law 92-255, Section 409, as amended.

OBJECTIVES: To assist the states in the preparation of plans for planning, establishing, conducting and coordinating projects for the development of more effective drug abuse prevention functions; carrying out projects under and otherwise implementing such plans; evaluation of such plans; paying the administrative expenses of carrying out such plans.

TYPES OF ASSISTANCE: Formula Grants.

USES AND USE RESTRICTIONS: Initial planning grant funds may be used only for expenses directly related to the preparation of the State plan. Funds may be used to support costs directly related to administering or supervising the administration of the State plan as well as implementing the activities and programs as set forth in the State Plan. Drug abuse formula grant funds may not be used for: (1) supplanting State, local and other non-Federal funds that would, in the absence of the drug abuse formula grant, be made available to conduct drug abuse programs planning and prevention activities in the State. (2) acquisition of land or construction or acquisition of buildings. (3) expenses of central administrative departments of State and local governments other than those directly related to administration of the State drug abuse plan. (4) administrative costs exceeding 10 percent of a State's allocation, or $50,000, whichever is less. (5) administrative costs of services which the State is required to provide at its own expense in order to satisfy the maintenance of effort requirement; or administrative costs attributable to other grant assisted programs. JOINT FUNDING: This program is considered suitable for joint funding with closely related Federal financial assistance programs in accordance with the provisions of OMB Circular No. A-111. For programs that are not identified as suitable for joint funding, the applicant may consult the headquarters or field office of the appropriate funding agency for further information on statutory or other restrictions involved.

ELIGIBILITY REQUIREMENTS:

Applicant Eligibility: Applicant must be the State agency designated by the governing authority of the State as the sole agency for the preparation and administration or supervision of the preparation and administration of the State plan.

Beneficiary Eligibility: People in local communities in need of prevention, treatment, and rehabilitation programs for narcotic addiction and drug abuse.

Credentials/Documentation: Governors (or their designated plan review agencies) must be given an opportunity to review the State Plan pursuant to Part III, Attachment A of OMB Circular No. A-95 (revised). Governor's comments must be submitted with State plan. Costs will be determined in accordance with FMC 74-4 for State and local governments.

APPLICATION AND AWARD PROCESS:

Preapplication Coordination: Not Applicable.

Application Procedure: State agency designated by Governor as the sole agency for the preparation and administration or supervision of the preparation and administration of the State plan, must submit State plan. Further instructions and guidelines should be obtained from the National Institute on Drug Abuse.

Award Procedure: Notification of the grant award must be made to the designated State Central Information Reception Agency in accordance with Treasury Circular 1082.

Deadlines: Annual State Plan submission due on July 15. Submit plan to Division of Community Assistance, National Institute on Drug Abuse.

Range of Approval/Disapproval Time: Not applicable.

Appeals: Not applicable.

Renewals: Not applicable.

ASSISTANCE CONSIDERATIONS:

Formula and Matching Requirements: Allotments to the states will be computed utilizing the following weights: (1) One-third weight on the basis of the relationship of the population in each State to the total population of all the states; (2) One-third weight on the basis of total population weighted by financial need as determined by the relative per capita income for each State for the three most recent consecutive years for which data is available from the Department of Commerce; and (3) One-third weight on the basis of need as determined by the following three equally weighted factors: a) relative population between ages 12 - 24; b) relative incidence of serum hepatitis, Type B; and c) State perceived need as measured by its relative per capita expenditure for drug abuse.

Length and Time Phasing of Assistance: Support is contingent upon annual appropriation of funds for drug formula grants.

POST ASSISTANCE REQUIREMENTS:

Reports: Annual progress reports and periodic data management system reports; other reports that the Secretary may require; Financial Status Report required annually.

Audits: All required records and reports shall be available to persons designated by the Secretary for purposes of making audits, examinations, evaluations, excerpts and transcriptions.

Records: State agency shall retain fiscal records for 3 years. Records must be retained beyond the 3 year period if audit findings have not been resolved.

FINANCIAL INFORMATION:

Account Identification: 75-1361-0-1-550.

Obligations: (Grants) FY 78 $40,000,000; FY 79 est $40,000,000; and FY 80 est $0.

Range and Average of Financial Assistance: $28,919 to $3,963,359; $727,273.

PROGRAM ACCOMPLISHMENTS: During fiscal year 1978, 55 applications were received and fifty-five awards to states and territories were made. The same amount is estimated for fiscal year 1979. For fiscal year 1980 this program is being proposed as part of a consolidated Alcohol, Drug Abuse, and Mental Health grants to States Program.

REGULATIONS, GUIDELINES, AND LITERATURE Formula published in Federal Register Vol. 42, No.10, January 14,1977.

INFORMATION CONTACTS:

Regional or Local Office: Regional Health Administrator, HEW Regional Office. (See address appendix).

Headquarters Office: Division of Community Assistance, Director, Robert S. Roberton, National Institute on Drug Abuse, ADAMHA, PHS, DHEW Parklawn Bldg., 5600 Fishers Lane, Rockville, MD 20857. Telephone: (301) 443- 6780. (Use same 7-digit number for FTS).

RELATED PROGRAMS: 13.235, Drug Abuse Community Service Programs; 13.254, Drug Abuse Demonstration Programs; 13.275, Drug Abuse Education Programs; 13.277, Drug Abuse Research Scientist Development and Research Scientist Awards; 13.279, Drug Abuse Research Programs; 13.280, Drug Abuse Clinical or Service Related Training Programs.

EXAMPLES OF FUNDED PROJECTS: All awards are for assistance to states for programs which deal with the development of more effective drug abuse prevention functions.

CRITERIA FOR SELECTING PROPOSALS: Submission of acceptable State Plan.

13.271 ALCOHOL RESEARCH SCIENTIST DEVELOPMENT AND RESEARCH SCIENTIST AWARDS

(Research Career ("K") Awards)

FEDERAL AGENCY: ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION, PUBLIC HEALTH SERVICE, DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

THE FOUNDATION DIRECTORY
Edition 4

Reprinted from The Foundation Directory, Edition 4, Marianna O. Lewis, Editor, The Foundation Center, New York City.

CALIFORNIA

1
A. J. S .Foundation
One Wilshire Building, Suite 1600
Wilshire Boulevard at Grand Avenue
Los Angeles, California 90017

Incorporated in 1956 in California.

Donor: Alice J. Steigerwald.

Purpose and Activities: Broad purposes; general giving, with emphasis on community and Jewish welfare funds, education, and hospitals.

Financial Data (year ended 31 December 1968): Assets, $198,143 (M); gifts received, $18,936; expenditures, $37,179 for 47 grants.

Officers and Directors: Alice J. Steigerwald, President; John S. Steigerwald, Vice-President; Beatrice J. Hammond, Secretary; Joseph G. Steigerwald, Treasurer.

2
Aaron (Mary M.) Memorial Trust–Scholarship Fund
P. O. Box 2069
Marysville, California 95901

Trust established in 1954 in California.

Donor: Charles Francis Aaron.†

Purpose and Activities: To aid students who need financial assistance to complete their education.

Financial Data (year ended 30 June 1969): Assets, $523,246 (M); expenditures, $17,614, including $15,125 for 56 grants.

Trustees: Dirck W. Arrowsmith, N. D. Bradshaw, Wesley D. Chipman, Elmer E. Jones, Randolph A. Schnabel.

3
Adolph's Foundation, The
P. O. Box 828
Burbank, California 91503

Incorporated in 1953 in California.

Donor: Adolph's, Ltd.

Purpose and Activities: Charitable purposes; general giving, with emphasis on cultural programs, including support for opera companies, a local music center, and a symphony orchestra; support also for local mental health centers.

Financial Data (year ended 28 February 1969): Assets, $1,460,401 (M); gifts received, $427,813; expenditures, $196,122, including $185,193 for 30 grants.

Officers and Directors: Lloyd Rigler, President; Hilard L. Kravitz, Vice-President; Lawrence E. Deutsch, Secretary-Treasurer; Mortimer P. Masure, Simon Miller.

4
Aetna Foundation, The
1301 Wilshire Boulevard
Los Angeles, California 90017

Incorporated in 1956 in California.

Donor: Stella Weingart Trust No. 2.

Purpose and Activities: Primarily local giving, with emphasis on a welfare organization.

Financial Data (year ended 30 April 1969): Assets, $975,716 (L); gifts received, $377,503; expenditures, $33,525, including $33,300 for 4 grants.

5
Ahmanson Foundation, The
9301 Wilshire Boulevard
Beverly Hills, California 90210

Incorporated in 1952 in California.

Donors: Howard F. Ahmanson,† Dorothy G. Sullivan, and members of the Ahmanson family.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on community funds, medical research, museums, education, youth agencies, and social agencies.

Financial Data (year ended 31 October 1968): Assets, $2,619,506 (L); gifts received, $305,400; expenditures, $587,673 for 176 grants.

Officers: Mrs. Dorothy G. Sullivan, President;* Robert H. Ahmanson,* William H. Ahmanson,* Vice-Presidents; Miss E. Martha Cates, Secretary-Treasurer.

*Trustees:** Howard F. Ahmanson, Jr., Robert M. DeKruif, Franklin D. Murphy, M.D., Thomas C. Webster.

6
Alameda County Community Foundation, The
c/o Wells Fargo Bank
415 Twentieth Street
Oakland, California 94604

Community foundation established in 1932 in California by resolution and declaration of trust.

Purpose and Activities: Charitable, educational, and medical purposes; grants to community welfare agencies, principally for capital purposes, chiefly for the benefit of children and youth.

Financial Data (year ended 31 December 1968): Active capital, $879,271 (L); expenditures, $38,922, including $31,125 in grants.

Officer: Glen A. Wardhaugh, Secretary of the Governing Board.

Governing Board: Thad McCarty, Chairman; Homer J. Bemiss, R. W. Breuner, Mrs. Ralph T. Fisher, James B. Graeser, K. L. Hamman, Otto H. Hieb, William F. Knowland, Arthur J. Melka, Carl B. Metoyer, Lawrence S. Simon.

Trustees: Bank of America, Central Valley National Bank, Crocker-Citizens National Bank, Oakland Bank of Commerce, United California Bank, Wells Fargo Bank.

7
Alanson (Mabel Bartholomew) Memorial Fund
c/o Crocker-Citizens National Bank
One Montgomery Street
San Francisco, California 94104

Trust established in 1955 in California.

Donor: Bertram E. Alanson.

Purpose and Activities: Charitable purposes.

Financial Data (year ended 31 December 1965); Assets (August 1965), $366,666 (M); grants, $13,500.

Trustee: Crocker-Citizens National Bank.

8
Alexander (The E. W.) Educational Trust
c/o Crocker-Citizens National Bank
P. O. Drawer H-H
1001 State Street
Santa Barbara, California 93102

Trust established in 1946 in California.

Donor: Henrietta L. Alexander.†

Purpose and Activities: To provide financial assistance to students resident in Santa Barbara County, selected by a committee of six prominent citizens.

Financial Data (year ended 31 December 1968): Assets, $460,235 (L); gifts received, $3,310; expenditures, $24,674, including $24,577 for 48 scholarships.

Trustee: Crocker-Citizens National Bank.

9
Allequash Foundation, The
234 East Colorado Boulevard, Room 3730
Pasadena, California 91101

Incorporated in 1961 in California.

Donors: Alexander P. Hixon, Midland Investment Company.

Purpose and Activities: Broad purposes; grants largely for higher and secondary education and local giving, with emphasis on an art museum and community funds.

Financial Data (year ended 30 June 1968): Assets, $178,875 (L); gifts received, $31,697; expenditures, $34,081, including $33,452 for about 30 grants.

Officers and Directors: Alexander P. Hixon, President; Adelaide F. Hixon, Vice-President; John Connell, Secretary-Treasurer.

10
American Cement Foundation
2404 Wilshire Boulevard
Los Angeles, California 90057

Incorporated in 1951 in California.

Donor: Riverside Cement Company.

Purpose and Activities: Broad purposes; local giving in areas of Company operations.

Financial Data (year ended 31 December 1969): Assets, $408,253 (L); gifts received, $43,000; expenditures, $73,662, including $72,307 for 50 grants.

Officers: A. L. Chickering, Jr.,* President; G. A. Beckett,* R. L. Lambert, Vice-Presidents; R. L. Heggen, Secretary; *G. W. Meeker, Treasurer.*

*Trustees:** W. G. Henshaw, G. J. O'Brien, R. L. Whitley.

11
Ampex Foundation
401 Broadway
Redwood City, California 94063

Incorporated in 1957 in California.

Donor: Ampex Corporation.

Purpose and Activities: General purposes; grants to community funds and other charitable and educational agencies in areas of company operations.

Financial Data (year ended 30 April 1970): Assets, $130,870 (M); gifts received, $108,333;

---

† Deceased. M: Market Value. L: Ledger Value.
* Starred officers are also members of the governing board.
Italicized name indicates person to whom communications should be addressed.

expenditures, $139,653, including $139,643 for 95 grants.

Officers: Richard J. Elkus,* President; John P. Buchan,* Vice-President; *James E. Brown, Secretary* and Treasurer.

*Trustees:** Henry A. McMicking, Henry W. West, Jr.

1
Apple Valley Foundation
P. O. Box 1
Apple Valley, California 92307

Incorporated in 1953 in California.

Donors: B. J. Westlund, Joseph A. Ball, Newton T. Bass.

Purpose and Activities: Community betterment, with emphasis on recreation and conservation, church support, and hospitals.

Financial Data (year ended 31 December 1969): Assets, $651,416 (L); gifts received, $10,093; expenditures, $25,667, including $19,490 for 17 grants.

Officers and Directors: Newton T. Bass, President; Joseph A. Ball, Vice-President; W. E. Cramer, Jr., Secretary-Treasurer.

2
Arakelian (K.) Foundation
360 Bullard Avenue West
Fresno, California 93704

Incorporated in 1943 in California.

Donor: Krikor Arakelian.†

Purpose and Activities: Charitable and educational purposes; student loan funds established at five higher educational institutions which administer them; charitable giving largely for hospitals; support also for scholarship funds, health agencies, and community funds. Grants limited to the area of Fresno and Madera counties.

Financial Data (year ended 31 December 1968): Assets, $949,709 (L); expenditures, $100,059, including $75,403 for 23 grants.

Officers and Directors: A. George Emerzian, President; Aram Arakelian, Vice-President; Marian Arakelian, Secretary-Treasurer; Rose Markarian.

3
Arkelian (Ben H. and Gladys) Foundation
1107 Truxtun Avenue
Bakersfield, California 93301

Established in California.

Purpose and Activities: Primarily local giving, with emphasis on hospitals, a center for the aged, and social agencies.

Financial Data (year ended 31 December 1966): Assets, $1,851,369 (L); gifts received, $38,511; expenditures, $72,586, including $68,350 for 14 grants.

4
Artevel Foundation
Crocker-Citizens Plaza, Suite 2152
611 West Sixth Street
Los Angeles, California 90017

Incorporated in 1966 in California.

Purpose and Activities: Grants largely for Protestant evangelistic and missionary programs.

Financial Data (year ended 31 December 1968): Assets, $1,115,338 (M); gifts received, $910,250; expenditures, $12,210, including $1,925 for 19 grants.

Officers and Trustees: Harm te Velde, President; Zwaantina te Velde, Vice-President; George R. Phillips, Secretary and Treasurer.

5
Ashrule Foundation
515 Warner Avenue
Los Angeles, California 90024

Incorporated in 1967 in California.

Purpose and Activities: Primarily local giving, with emphasis on higher education, temple support, and Jewish welfare funds.

Financial Data (year ended 31 December 1968): Assets, $47,955 (L); gifts received, $72,720; expenditures, $37,985 for about 47 grants.

Officers and Directors: Asher Levin, President; Anthony A. Allina, Vice-President; Ruth W. Levin, Secretary and Treasurer.

6
Atkinson Foundation
Ten West Orange Avenue
South San Francisco, California 94080

Incorporated in 1939 in California.

Donors: Geo. H. Atkinson, Mildred M. Atkinson,† Guy F. Atkinson,† and others.

Purpose and Activities: Broad purposes; primarily devoted to the activities of Willamette University and the Methodist Church in northern California and overseas through its Division of World Missions; scholarships to local high school graduates to attend Willamette; some assistance to local recognized charities. No grants for research or doctoral studies.

Financial Data (year ended 31 December 1969): Assets, $5,160,312 (M); gifts received, $6,310; expenditures, $281,779, including $278,776 for about 130 grants.

Officers and Directors: Geo. H. Atkinson, President; Duane E. Atkinson, Ray N. Atkinson, Earl H. Atkinson, E. M. Jennett, Vice-Presidents; *Donald K. Grant, Secretary*-Treasurer; G. P. Gordon, D. W. Moore, Bryant K. Zimmerman.

7
Atkinson (Myrtle L.) Foundation
3278 Wilshire Boulevard, Room 601
Los Angeles, California 90005

Incorporated in 1940 in California.

Donors: Guy F. Atkinson,† Mrs. Rachel C. Atkinson.

Purpose and Activities: "To teach, promulgate and disseminate the gospel of Jesus Christ throughout the world and also to unite in Christian Fellowship the large number of consecrated Christians in the various evangelical churches . . . ; to encourage and promote religious, scientific, technical and all other kinds of education, enlightenment and research."

Financial Data (year ended 31 December 1968): Assets, $1,381,049 (L); gifts received, $17,688; expenditures, $179,672, including $178,852 for 135 grants.

Officers and Directors: Elizabeth A. Whitsett, Vice-President; Rachel C. Atkinson, Secretary-Treasurer.

8
B. W. Foundation, The
1301 Wilshire Boulevard
Los Angeles, California 90017

Incorporated in 1951 in California.

Donors: Ben Weingart, Stella Weingart Trust No. 2.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on higher education, hospitals, and welfare agencies.

Financial Data (year ended 30 June 1968): Assets, $7,714,398 (M); gifts received, $195,834; expenditures, $46,528, including $45,855 for 19 grants.

Officers and Trustees: Ben Weingart, President; John Poag, Vice-President; Jack Rosenburg, Secretary; Alex Deutsch.

9
Babcock (Katharine) Trust
c/o Myrick and Deering and Scott
544 Market Street
San Francisco, California 94104

Trust established in 1930 in California.

Donor: Katharine Babcock.†

Purpose and Activities: Provides free hospital care for women and children in San Francisco County; grants also for local hospital building funds.

Financial Data (year ended 31 December 1968): Assets, $776,694 (L); expenditures, $37,483, including $33,235 for 38 grants.

Trustee: Francesca Deering Howe.

10
Babcock (William) Memorial Endowment
1601 Second Street
San Rafael, California 94901

Trust established in 1954 in California; incorporated in 1959.

Donor: Julia May Babcock.†

Purpose and Activities: To meet through grants or loans the exceptional medical, surgical, and hospital expenses of residents of Marin County; project grants to institutions for initiation or expansion of medical care services of direct benefit to residents of the county.

Financial Data (year ended 28 February 1970): Assets, $3,019,002 (M); gifts received, $1,318; expenditures, $284,261, including $215,943 in grants.

Officers: Louis W. Niggeman,* President; Rex Silvernale,* 1st Vice-President; Mrs. Harris C. Kirk,* 2nd Vice-President; Fred F. Enemark,* Secretary; A. Crawford Greene, Jr.,* Treasurer; *Miss Julia Bloomfield, Administrator.*

*Directors:** Harry P. Graves, Russell R. Klein, M.D., Catherine C. Pike, M.D., William W. Schwarzer.

11
Bacon (The Francis) Foundation, Inc.
655 North Dartmouth Avenue
Claremont, California 91711

Incorporated in 1938 in California.

Donors: Walter Conrad Arensberg,† Louise Stevens Arensberg.†

Purpose and Activities: To promote study in science, literature, religion, history, and philosophy with special reference to the works of Francis Bacon, his character and life, and his influence on his own and succeeding times; maintenance of a rare-book library for research and reference; grants to various educational institutions for lectureships; occasional publication of brochures, articles, and bibliographies.

Financial Data (year ended 31 December 1969): Assets, $963,190 (M); expenditures, $43,478, including $6,530 for 5 grants.

Officers and Trustees: Elizabeth S. Wrigley, President and Director of Library; A. S. Van Denburgh, Vice-President and Treasurer; Emrys J. Ross, Secretary; Odo B. Stade, John E. Stevens.

MICHIGAN

1
Aeroquip Foundation
505 Wildwood Avenue
Jackson, Michigan 49201

Incorporated in 1962 in Michigan.

Donor: Aeroquip Corporation.

Purpose and Activities: Broad purposes; general giving, with emphasis on community funds, a local museum, hospitals, youth agencies, and higher education.

Financial Data (year ended 31 December 1969): Assets, $532,376 (M); gifts received, $125,000; expenditures, $88,303, including $87,760 for 44 grants.

Officers and Trustees: Don T. McKone, President; F. M. Davison, Vice-President; *F. W. Corwin, Secretary-Treasurer.*

2
Allen Industries Foundation, Inc.
17515 West Nine Mile Road
Southfield, Michigan 48075

Incorporated in 1952 in Michigan.

Donor: Allen Industries, Inc.

Purpose and Activities: General giving, with emphasis on religious welfare funds and community funds.

Financial Data (year ended 30 November 1969): Assets, $15,826 (M); gifts received, $75,000; expenditures, $102,633, including $102,623 for 100 grants.

Officers and Trustees: H. C. Allen, President; O. A. Markus, Vice-President and Treasurer; David Schimmel, Vice-President; Jay W. Allen, Secretary; William L. Darby.

3
American Motors Corporation Charitable Trust
14250 Plymouth Road
Detroit, Michigan 48232

Trust established in 1947 in Michigan.

Donor: American Motors Corporation.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on community funds.

Financial Data (year ended 30 September 1968): Assets, $53,841 (M); expenditures, $85,121, including $84,000 for 5 grants.

Board of Control: I. M. Anderson, Frank G. Armstrong, *G. T. Etheridge.*

Trustee: The Detroit Bank and Trust Company.

4
Anderson Family Fund, The
8131 East Jefferson Avenue
Detroit, Michigan 48214

Trust established about 1952; incorporated in 1959 in Michigan.

Purpose and Activities: Broad purposes; grants largely for a local community fund, hospitals, and education. No grants to individuals.

Financial Data (year ended 31 December 1969): Assets, $176,554 (M); gifts received, $115,396; expenditures, $64,730, including $63,500 for 3 grants.

Officers and Trustees: John W. Anderson II, President; Wendell W. Anderson, Jr., Vice-President; Clark Swart, Secretary and Treasurer.

5
Angell (William R.) Foundation
2853 Guardian Building
Detroit, Michigan 48226

Incorporated about 1950 in Michigan.

Purpose and Activities: Primarily local giving, with emphasis on library funds for higher and secondary educational institutions, community funds, and a water pollution project.

Financial Data (year ended 31 December 1968): Assets, $499,982 (L); expenditures, $27,785, including $25,350 for 13 grants.

*Officers and Trustees:** W. Craig Keith,* President; Paul S. Christie,* Everett R. Hames, Eldon Henderson,* Vice-Presidents; William M. Skillman,* Vice-President, Secretary and Treasurer.

6
Armstrong (John W. and Virginia C.) Foundation
c/o National Bank of Detroit
Detroit, Michigan 48232

Trust established in 1956 in Michigan.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on higher education, Presbyterian church support, religious associations, and welfare agencies, and on youth agencies and hospitals.

Financial Data (year ended 31 December 1968): Assets, $191,354 (M); expenditures, $37,633, including $36,500 for 11 grants.

Trustees: Stewart E. McFadden, Eleanor S. Payne, B. Kenneth Sanden.

7
Bargman (Theodore and Mina) Foundation
13950 John R Street
Detroit, Michigan 48203

Incorporated in 1954 in Michigan.

Donor: Mina Bargman.†

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on higher education, including medical education, and Jewish welfare funds; grants also for hospitals, mental health, temple support, and child welfare.

Financial Data (year ended 31 December 1968): Assets, $1,404,662 (M); gifts received, $16,513; expenditures, $201,574, including $197,600 for 26 grants.

Officers and Directors: Joseph H. Jackier, President and Treasurer; Bruce R. Mayhew, Vice-President; Maxwell E. Katzen, Secretary.

8
Battjes (Dewey D. and Hattie) Foundation
2100 Chicago Drive, S.W.
Grand Rapids, Michigan 49509

Incorporated in 1952 in Michigan.

Donors: Dewey D. and Hattie Battjes.

Purpose and Activities: Broad purposes; grants largely for religious programs and higher and secondary education.

Financial Data (year ended 31 December 1968): Assets, $447,143 (L); expenditures, $55,816, including $55,275 for 70 grants.

Officers: Mrs. Hattie Battjes,* President and Treasurer; Clyde Battjes,* Vice-President; Don Battjes, Secretary and Executive Director.

*Trustees:** Mrs. Donald Battjes, Donald Battjes, Sr., Mrs. L. Vanden Berg.

9
Bentley (Alvin M.) Foundation
P. O. Box 458
Owosso, Michigan 48867

Incorporated in 1961 in Michigan.

Donor: Alvin M. Bentley.†

Purpose and Activities: Broad purposes; largely local giving, with emphasis on scholarships, an international cooperation program, and community funds.

Financial Data (year ended 31 July 1969): Assets, $1,721,626 (L); gifts received, $81,786; expenditures, $17,912, including $9,194 for 12 grants.

Officers and Trustees: Prentiss M. Brown, President; *Norman L. Des Jardins, Secretary;* Mark C. Stevens, Treasurer; Charles L. Anspach, Paul B. Bagwell, Alvin M. Bentley, Jr., Mrs. Alvin M. Bentley, Michael D. Bentley, Helen B. Dawson, James S. Gilmore, Marion Wall.

10
Bentley (Calvin P. and Irma B.) Charitable Foundation
c/o The Detroit Bank and Trust Company
201 West Fort Street
Detroit, Michigan 48231

Trust established in 1955 in Michigan.

Donors: Calvin P. Bentley,† Irma B. Bentley.

Purpose and Activities: Broad purposes; grants largely for youth agencies, hospitals, community funds, education, and Protestant church support.

Financial Data (year ended 30 September 1969): Assets, $617,882 (M); expenditures, $33,061, including $31,200 for 84 grants.

Distribution Committee: Clara Belle B. Brewer, *Michael R. Dufour,* Irma B. Moore, Irma B. Bentley Wall.

Trustee: The Detroit Bank and Trust Company.

11
Bergsma Brothers Foundation
425 Richmond Street, N.W.
Grand Rapids, Michigan 49502

Trust established in 1951 in Michigan.

Purpose and Activities: Primarily local giving, with emphasis on religious and educational institutions and hospitals.

Financial Data (year ended 30 November 1968): Assets, $37,079 (L); gifts received, $58,570; expenditures, $29,053 for 53 grants.

Trustees: Kenneth Bergsma, Lawrence J. Vander Ploeg.

† Deceased. M: Market Value. L: Ledger Value.
* Starred officers are also members of the governing board.
Italicized name indicates person to whom communications should be addressed.

1
Besser Foundation
150-B North State Street
Alpena, Michigan 49707

Incorporated in 1944 in Michigan.

Donors: J. H. Besser, Besser Manufacturing Company.

Purpose and Activities: General purposes; primarily local giving, with emphasis on higher, secondary, and elementary education.

Financial Data (year ended 31 December 1968): Assets, $3,228,816 (L); expenditures, $28,280, including $27,450 for 8 grants.

Officers: Jesse H. Besser,* President and Treasurer; Frederick A. Johnston,* Vice-President; Harold Nicholson, Secretary.

*Trustees:** Edward Adams, Jr., Rev. Robert M. Barksdale, Harold Hudson, Carl F. Reitz, Russell H. Wilson.

2
Besser (Jesse) Fund, Inc.
150 State Street
Alpena, Michigan 49707

Incorporated in 1960 in Michigan.

Donor: Besser Company.

Purpose and Activities: Charitable giving in northeastern Michigan, primarily in Alpena, with emphasis on higher education and public schools, church building funds, mental health, aid to the blind, and community funds.

Financial Data (year ended 31 December 1968): Assets, $3,688,884 (M); gifts received, $377,371; expenditures, $70,815, including $69,475 for 9 grants.

Officers: Jesse H. Besser,* President and Treasurer; Edward Adams, Jr.,* Vice-President; C. F. Reitz, Secretary.

*Trustees:** Fred J. Kennedy.

3
Bishop (A. G.) Charitable Trust
c/o Genesee Merchants Bank & Trust Co.
One East First Street
Flint, Michigan 48502

Trust established in 1944 in Michigan.

Donor: Arthur Giles Bishop.†

Purpose and Activities: Primarily local giving, with emphasis on higher education, youth agencies, health agencies, and community funds.

Financial Data (year ended 31 December 1968): Assets, $562,017 (M); expenditures, $80,540, including $73,750 for 37 grants.

Trustees: Mrs. Robert H. Bellairs, A. William Bishop, Genesee Merchants Bank & Trust Co.

4
Boutell (Arnold and Gertrude) Memorial Fund
c/o Second National Bank of Saginaw
Saginaw, Michigan 48607

Trust established in 1961 in Michigan.

Donors: Arnold and Gertrude Boutell.†

Purpose and Activities: Charitable and educational purposes; grants, limited to Saginaw County, largely for community funds, and special educational programs, including work with mentally or physically handicapped children.

Financial Data (year ended 31 March 1969): Assets, $3,841,644 (L); expenditures, $123,256, including $100,952 for 12 grants.

Trustee: Second National Bank of Saginaw.

5
Breech Foundation, The
112 Linda Lane
Bloomfield Hills, Michigan 48013

Incorporated in 1950 in Michigan.

Purpose and Activities: Broad purposes; grants largely for higher and secondary education, church support and religious associations, community funds, and hospitals.

Financial Data (year ended 31 December 1968): Assets, $1,801,710 (M); gifts received, $99,390; expenditures, $30,103, including $28,175 for 72 grants.

Officers and Trustees: Ernest R. Breech, President and Treasurer; Thelma K. Breech, Vice-President; Walter P. Feehily, Secretary; E. Robert Breech, Jr., William H. Breech.

6
Bugas Fund, The
16025 Northland Drive
Southfield, Michigan 48075

Incorporated in 1956 in Michigan.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on church support, secondary education, youth agencies, and community funds.

Financial Data (year ended 30 November 1968): Assets, $804,924 (M); gifts received, $77,978; expenditures, $61,155, including $61,150 for 16 grants.

Officers and Trustees: John S. Bugas, President and Treasurer; Margaret S. Bugas, Vice-President; Raymond E. Stuart, Secretary.

7
Bundy Foundation, The
8109 East Jefferson Avenue
Detroit, Michigan 48214

Incorporated about 1953 in Michigan.

Purpose and Activities: Broad purposes; general giving, with emphasis on higher and secondary education and local community funds; grants also for music, museums, hospitals, and youth agencies. No grants to individuals.

Financial Data (year ended 31 December 1969): Assets, $2,423,598 (M); gifts received, $80,090; expenditures, $241,245, including $217,983 for 45 grants.

Officers: Wendell W. Anderson, Jr.,* President; John W. Anderson II,* Vice-President; Robert E. Barton, Secretary and Treasurer.

*Trustees:** Clark Swart.

8
Burns Foundation, Inc.
560 West Mitchell Street
Petoskey, Michigan 49770

Incorporated in 1948 in Michigan.

Donors: Dean C. Burns, M.D., Marcella Burns.

Purpose and Activities: General purposes; grants largely for local and regional programs; maintains a medical library

Financial Data (year ended 31 December 1968): Assets, $112,439 (M); expenditures, $34,102, including $26,839 for 1 gift.

Officers and Trustees: Dean C. Burns, M.D., President; C. Frederick Curtis, Vice-President; Eder C. Matthews, Secretary-Treasurer; Dean D. Burns, Heber R. Curtis.

9
Burroughs Foundation
6071 Second Avenue
Detroit, Michigan 48232

Trust established in 1951 in Illinois.

Donor: Burroughs Corporation.

Purpose and Activities: General purposes; grants largely for higher education, hospitals, community funds, and community service programs related to civic, cultural, and youth activities. No grants for personal research projects or scholarships.

Financial Data (year ended 31 December 1969): Assets, $886,593 (M); expenditures, $305,398, including $305,390 for 60 grants.

Committee on Contributions: Donald E. Young, Chairman; William McCampbell, Secretary; Michael R. Capo, Charles E. Macon, H. Scott Woodward.

Trustee: The Northern Trust Company (Chicago, Illinois).

10
Campbell-Ewald Foundation, The
General Motors Building, 4th Floor
3044 West Grand Boulevard
Detroit, Michigan 48202

Incorporated in 1953 in Michigan.

Donor: Campbell-Ewald Company.

Purpose and Activities: Broad purposes; grants largely for higher education and community funds.

Financial Data (year ended 31 December 1969): Assets, $3,243 (L); gifts received, $70,000; expenditures, $101,340 for 28 grants.

Officers and Trustees: Thomas B. Adams, President; Hugh M. Redhead, Stoffer J. Rozema, Walter S. McLean, Vice-Presidents; *Edward M. Talbert, Secretary-Treasurer.*

11
Cannon Fund, The
2875 Lincoln Street
Muskegon, Michigan 49443

Trust established in 1953 in Michigan.

Donors: Members of the Cannon family and family-related businesses.

Purpose and Activities: Broad purposes; primarily local giving, with emphasis on Roman Catholic church support, community funds, hospitals, and education.

Financial Data (year ended 31 August 1968): Assets, $362,207 (M); gifts received, $104,051; expenditures, $42,520 for 35 grants.

Trustees: George W. Cannon, Jr., William J. Cannon, Jack A. Sorensen.

12
Carey (The Elaine and Walter) Foundation
3401 North Dort Highway
Flint, Michigan 48506

Incorporated in 1953 in Michigan.

Donors: Walter F. Carey and others.

Purpose and Activities: General purposes; primarily local giving, with emphasis on higher education; grants also for Protestant church support and transportation and safety.

Financial Data (year ended 30 November 1968): Assets, $616,168 (M); gifts received, $31,500; expenditures, $16,905, including $16,900 for 9 grants.

Officers and Directors: Walter F. Carey, President and Secretary; Elaine T. Carey, Vice-President and Treasurer; North F. Carey, May H. Conner.

13
Carlson Foundation, The
409 Griswold Street
Detroit, Michigan 48226

Incorporated in 1952 in Michigan.

Donors: Acme Manufacturing Company and others.

IS THERE LIFE AFTER SEED MONEY?

By

Harriet Bograd

Reprinted from Prevention: A Course for Local Program Survival, Government Printing Office, November, 1977. Supplied by The Teacher Center, Inc., May, 1976.

The Teacher Center, Inc. (New Haven, Ct.) was founded in 1971 as an independent, non-profit, resource, support, and advisory center for New Haven area teachers and parents interested in education./1/ One of the most important characteristics which distinguishes the Teacher Center from other institutions involved in teacher education is that it is a grassroots organization, founded and run by teachers themselves. It is thus uniquely sensitive to the needs of teachers and committed to responding to those needs. As an independent organization, unaffiliated with any school system or governmental agency, it is free of the restrictions frequently imposed on groups endeavoring to innovate and promote change. This paper is a case study of the process by which the Teacher Center, Inc. is planning a funding strategy. It has had foundation "seed money" for five years, and now needs to find new sources of support to enable to continue to exist.

In planning a funding strategy, we are evaluating many alternative possible sources of funds, and deciding which ones to pursue. (This is illustrated by the chart on the next page.) We are thinking carefully about how best to use our fund-raising time and effort. We keep working to clarify our values and program priorities, and consider carefully how obtaining funds from each possible source might affect our ability to implement these values and priorities.

We believe that many people who are involved in other teacher centers or other non-profit organizations, and the people involved in providing funds for them, may be interested in our experiences and our thinking. We do not assume that our funding strategy would be appropriate in other settings; we do not even know yet whether it will work for us here. I have been cautious about trying to spell out the lessons others can learn from this paper. Readers will find different aspects of the paper relevant or useful in thinking about their own situations.

A note to beginners: If you are working to start a new teacher center, please remember that our present program and funding strategy is the result of five years of very gradual expansion. We operated for six months without outside funding. We borrowed space, office machines, and materials and worked with volunteers. Then we got a small grant to hire a part-time coordinator. We believe that it is important not to grow too fast.

Background

The Teacher Center, Inc. opened in September 1971, received its first foundation grant in January 1972 (for $13,500 per year), and has grown to an annual budget of about $60,000. Its basic support has come from foundations; it also has received smaller grants and contracts for special projects from government arts agencies, school systems, and Head Start.

---

[1]See Corinne Levin and Robert Horwitz, "The Teacher Center, Inc. (New Haven, Connecticut): A Case Study," Educational Leadership, Vol. 33, No. 6 (March 1976), pp. 434-439 (entire issue is on teachers' centers), and Kathleen Devaney and Lorrain Thorn, Exploring Teachers' Centers, Far West Laboratory for Educational Research and Development, 1855 Folsom Street, San Francisco, Calif. 94103, pp. 141-150. Both publications give valuable surveys of the teachers' centers movement in the United States.

Because of generous and predictable foundation support, and because we kept our expenses very low, we have been free to develop the Center and provide free or low cost services to teachers, parents, and school systems without worrying too much about money.

But now the foundations feel they have done their share to nurture us. They have helped us demonstrate that a teacher center is a valuable and needed resource; now they want us to figure out how we can support ourselves without their continuing help. The Hazen Foundation's $18,500 grant for 1976, its fifth year of support, will be its last; the New World Foundation, after four years, will cut back in 1977 from $15,000 to $7,500.

To help us deal with our impending financial crisis, the New Haven Foundation included funding to pay for financial development in its first grant to us in 1976. The Teacher Center employed me, half-time for six months, to work on its funding prospects. I am a lawyer, and have been a member of the board of the Teacher Center since its beginning, and have had thirteen years' experience in funding and program development for non-profit organizations.

This position seemed a challenging opportunity to learn about how a creative, small institution can support itself in these difficult economic times. I believe in the Teacher Center deeply--it has been a source of support for me and many others during years of struggling for community and educational change.

Three months of my six-month term have passed thus far. We do not yet have any solutions. But we have opened many doors, explored many paths, considered many possibilities. We feel good about the planning process we have been going through, and think this is worth sharing with other teacher centers.

Building Credibility

I was aware when I started that there were many things about the Teacher Center that would make us "creo ble" to funding sources, that would make the funding work easier than it is for many struggling organizations. We are incorporated and tax-exempt. We have a superb director, Corinne Levin, a competent and dedicated board made up primarily of teachers and parents, and an excellent staff of advisors. The Center is actively used by teachers, college faculty and students, and many others, and nearly everyone who has used it is an enthusiastic ally. People with a wide range of teaching styles and personal philosophies feel welcome and supported at the Center. Our physical environment is creative and exciting, thanks to a grant from the National Endowment for the Arts. Our financial records are in good order and audited, and our program has been carefully documented, with records of who has used the Center, and with annual reports. We have received a very favorable written evaluation by an independent consultant employed by the New World Foundation. An article about us has just been published in a national journal--Educational Leadership, March 1976.

Finding Funding Resources

When we began work, we started to brainstorm all the possible sources of support that we could think of. I made a diagram to illustrate those possibilities (see page 2 above).

Since we made the diagram, I have been finding out about these possibilities, trying to decide which of these are worth pursuing, and then following through on those directions that seem most promising. For each source, we consider the following questions, among others:

1. How much time, money, and effort will it take to seek funds from this source?

2. If we do pursue this, how likely is it that we will obtain funds? (Are we competing with others? How many competitors? How would we compare with competitors in relation to this source?)

3. How will our program and organization be affected by receiving funds from this source?

a) Will this source help us do what we want to do, in the informal, supportive, integrated way in which we want to work, or will it make us become bureaucratic and specialized and less accessible to teachers and parents?

b) What are the record-keeping, reporting, and accounting requirements? Are they simple and sensible? Or do they require unreasonable amounts of paper work and bureaucratic procedures?

c) Will it require program expansion? Is the expansion in a direction in which we want to move? Are we competent, as an organization, to take on this new task?

4. How much are we likely to obtain from this source, and how much of this can be used to pay for our basic program of drop-in center, workshops, and advisory services to teachers and parents?

a) If the funds are for the special project, does the budget allow for the management costs and other overhead costs related to this project?

b) What are the requirements for matching funds? Will these requirements make us drain resources away from basic program priorities?

This is what we have found out, how we found it out, and what steps we decided to take so far:

U.S. Office of Education

One of the first things I did was to do research in the Federal Catalogue of Domestic Assistance, the basic research tool for federal funds. (I have located up-to-date copies in the grants offices of the local school system and nearby colleges. State and municipal grant offices would also have copies.)

The research was helpful in providing background on the various programs of federal support to education, how much money is available for each, and the procedures for applying. I noted that this year there were new federal programs for metric education, consumer education, and women's educational equity, and that the Elementary and Secondary Education Act had been amended so that educational innovations would now be in Title IVC rather than Title III. There are also federal funds for programs for gifted and talented, through the Bureau for the Education of the Handicapped.

I contacted the offices in Washington that handled these programs, and sent for guidelines and application forms. In general, by late February it was too late to apply for most of these sources for the 1976-77 academic year.

My research also confirmed my hunch about federal funds. The federal government generally does not give funds for education directly to non-profit organizations. The few exceptions to this are grants or contracts for special research or demonstration projects of national significance, or for national or regional technical assistance. The few progrms that are open to non-profit groups, such as consumer education, are intensely competitive; thousands of groups applied for a small number of grants. But most federal education money is paid either to states, to local school systems, or to colleges and universities. Often the money is given to the states to give out to local schools or colleges.

Local school systems or colleges can, however, make subcontracts with non-profit organizations like the Teacher Center to help them carry out a federally funded project. It is very helpful to understand the federal laws, regulations, and application procedures when approaching schools and colleges to explore possible subcontracts for federal funds.

We will continue to pay attention to federal funding opportunities, especially next year, but have no plans to seek any direct federal funding this year.

Local School Systems

I met with the director of program planning and the director of inservice education for the New Haven Schools. We already had a contract with New Haven for $8,000 for this year, and have applied for $12,000 for next year, for staff training related to Title VII of the Emergency School Aid Act (related to reducing racial tensions in schools). By the time I approached them, in March, it was too late to develop additional joint proposals for federal funding for the coming academic year. The one exception was the Women's Education Equity Act. After several meetings we decided that national competiton was too intense, and our own experience in the area too limited, to make it worthwhile to spend the time required to prepare a good proposal. The work we are already doing on sexism in education could be continued without a large budget; a federal grant in this area might be a distraction.

I did find the few meetings I attended useful in renewing contact with school officials, asking for their advice on our funding future, and learning more about their plans. We left open the possibility that they would contract with us for specific training services from time to time.

I also met with the person in chage of federal grants in one suburban school system, and discussed many possibilities. It is likely that they will receive in-service training funds through Title I of the Elementary and Secondary Education Act. If so, they will probably use some of this money to hire us.

We were delighted to find that a key administrator in this suburban system was eager to provide support to his teachers and was open to using the Teacher Center as a resource. We decided to ask this system to join us and the nearby state college in an application to the State Commission on Higher Education for a collaborative program. (More on this below.)

It seems clear now that we need to have an ongoing "marketing" program with all the school districts in the area, to encourage them to use in-service training funds, either from their local funds or through special state or federal grants, to hire us to do in-service training. However, this appears to be an enormous job, involving personal contacts and correspondence with 29 or more districts. We have been saving this task for the future while pursuing more immediate and promising leads. In the meantime, to prepare for the future task, I have obtained from the State Department of Education an address and phone list of all the superintendents in the state, and a computer printout on how much in federal funds was received by each school district in the state under each federal program. As an introductory contract, we sent the 29 superintendents in our region copies of our May-June and summer bullentins, and an invitation to a lecture at the Teacher Center by Ivan Illych.

State Department of Education

I spent one afternoon making phone calls to the State Education Department finding out whom to contact and what funds were available. The state has no money of its own available for teacher centers, but handles large amounts of federal funds. However, generally the state must pass these funds on to local education agencies. Thus if we want to get these funds we need to subcontract with local school systems or with a regional educational resource center. We obtained copies of state guidelines for various federal education programs, and a state grovernment directory, and found out that the man who coordinates federal programs in the State Department of Education was very helpful.

Sooner or later we want to spend more time with people in the State Education Department, getting them to visit us, finding out about their future plans. But there was no immediate prospect of funds.

State Commission on Higher Education

In Connecticut, the Commission on Higher Education has a small amount of state funds to support collaborative efforts among school systems, teacher training insititutions, and sometimes community agencies.

When we first heard of the program, we decided not to bother with it, because the grants would be small (maximum $7,000), and we expected the proposal writing process, involving three institutions, to be an enormous hassle. But then a woman in the state agency encouraged us to give it a try. We decided to plan one meeting each with a local school system and a teacher training college, and see what we could come up with.

We took the position that the college faculty and students had been using the Teacher Center for years without paying for it, and that since the state college did not have funds in its own budget to pay us, they could help by backing us on this proposal.

We were delighted by the response. In additon to agreeing to support the proposal, a number of college faculty agreed to donate their time to offer Teacher Center workshops and advisory services in return for our having college classes visit the Teacher Center. The Teacher Center, along with college faculty, agreed to provide training to the kindergarten teachers in the school system. And the school system was providing matching support by providing released time and travel expenses for its teachers.

Thus in a few days of meetings and proposal writing, we were able to come up with a neat little package. Whether or not the proposal is approved, we have developed a stronger working relationship with these institutions. This seemed to be time well spent./2/

State Department of Social Services

The most promising contact we have made is with the State Department of Social Services (formerly the Welfare Department). Under the new Title XX of the Social Security Act, the federal government will reimburse the state 75 percent of all money spent for training people working in social services programs funded by Title XX. This is an unlimited pool of federal money. Day care centers for low income children are part of Title XX. (Note that the day care bill vetoed by President Ford had no effect on Title XX training funds.)

We have been negotiating with the man in charge of Title XX planning to obtain a contract as "experts" to provide training to day care center staff members. Early childhood education has always been a major focus of our work at the Teacher Center, and we are committed to working with teachers of inner-city children. Thus this program has been very appealing to us.

The negotiations have been somewhat complex. Since the state does not have the money to pay the 25 percent local match, we had to agree to use foundation funds to match the federal money. We actually have to make a gift of this 25 percent to the state; then the state pays us 100 percent. (If you want more information about how we worked this out, contact me.)

Our proposed budget for 14 months is nearly $60,000 (of which we will put up $15,000). We hope to know in the next month or two whether this contract will be approved.

This is a brand new federal program, so state officials are still figuring out how to work with it. We were fortunate to find a state official who knew about the Teacher Center and was eager to obtain our training services. He and I have worked together closely on interpreting the guidelines and making them work in our situation.

---

[2]We found out in May that the legislature never appropriated the expected funds for this program.

Foundations

Although we are trying to diversify four sources of support, and not to rely on foundations as heavily as in the past, we are aware that foundation funds tend to be the most flexible and easiest to manage of the various possible sources of support. A relatively short proposal, a simple budget, and an annual financial report and progress report are all the paper work that is required. This is in sharp contrast to the lengthy negotiations, quarterly reports, matching funds, and detailed records and accounts that will be required to manage the training contract with the State Department of Social Services under Title XX, for example.

We are still exploring whether there are other foundations that will pick up where the Hazen and New World Foundations are leaving off.

We are hopeful that the New haven Foundation will contine to support us for at least two more years. This is a local community foundation. When we ftist opened, they refused to fund us, apparently because they were uncomfortable with our last of formal relationship with the New Haven School System. We we applied for 1976, a member of the central school administrative staff approached the foundation with us to support our application; we could show them a history of cooperative efforts with the schools.

In addition to foundations interested in the arts, discussed below, we are exploring foundations which have funded programs in Connecticut. We found one foundation which has its offices in another state, but which has a group of board members living in New Haven. A representative of this foundation came to visit us and agreed to invite other board members to meet us.

In order to do research on foundations, I found that Yale University has an Office of Special Prjects and Foundatins, with a well stocked library of reference materials. In this library, I used the Foundation Directory, the Foundation Grants Index, Foundation News, the Taft Information System, and annual reports of individual foundations. (The Foundation Center, 888 Seventh Avenue, New York, N.Y. 10019, has the authoritative library on foundations, and has branch libraries around the country. Contact them to find out where the nearest branch is to you. But also find out whether any community foundation colleges, other large, non-profit organization, school system, or other government agency, has a grants office with a good reference library.)

Sources Related to the Arts

We have in the past received small matching grants from the Connecticut Foundation on the Arts ($2,500) and the National Endowment for the Arts ($12,500) to support our arts and crafts advisory program and our work in environmental design. We have been working for five years with architects, designers, artists and crafts people, including faculty and students from the Yale School of Art and Architecture. The arts and environmental design focus is one of the most exciting aspects of the Teacher Center.

There are a few dilemmas that puzzle us as we begin to explore funding sources related to the arts. First, our commitment is to interdisciplinary inquiry. We emphasize the uses of the environment, and the uses of arts and crafts, as an integral part of curriculum in reading, math, science, social

studies, etc. Thus all parts of our program, and of our budget, are needed in order for the arts focus to make sense. In order to promote collaboration between teachers and artists, we need to have, on our staff of advisors, a balance of teachers and artists.

The reason this is a problem is that the state and federal arts agencies are only interested in paying the salaries of artists, and have difficulty paying, for example, for a math and sciences or early childhood advisor. Also, the government arts agencies generally only pay 50 percent matching funds. Thus to obtain additional arts funding, we need to spend more on hiring artists, and drain resources away from other basic priorities.

We are beginning to explore the availability of foundation funding related to arts in education programs. The foundations committed to educational innovation, which have funded teacher centers over the past five years, feel that they have done their share. But we want to find out whether foundations interested in arts in education may now be convinced that the teacher center model is an appropriate vehicle for their interests. We also want to explore whether such foundations would be willing to support a larger segment of our total program, since they are not limited by the legal restrictions of government art agencies.

So far, in order to explore this, we have done research on foundations interested in the arts, and have sent for the annual reports of several possibly relevant foundations. Soon we will begin sending preliminary proposals, making personal contacts, and trying to get foundation representatives to visit our center.

Humanities Sources

The Connecticut Humanities Council, an agency established with funds from the National Endowment for the Humanities, has 50 percent matching funds to pay for collaborative programs between college humanities professors and community people related to the theme "Being Heard--People, Public Issues, and the Humanities."

We made contact with this agency, got on their mailing list and obtained their literature. This agency is unusual in its effort to make its application process accessible to inexperienced groups; they have even written a manual on how to prepare an application for them.

However, we decided not to pursue this source at this time. Again, the problem is matching funds. Before we raise special grants for extra projects, we need to make sure that our basic priorities will be paid for over the next few years. Planning for a grant from the Humanities Council would drain our energy. We did, however, make the Council's literature available to our board members, and will keep this source in mind in case we get involved in a project which might be enhanced by such a grant.

Our Program Development Strategy

Our decision about the Humanities Council illustrates our philosophy about program development. We have always started by doing things simply, at low cost, because people involved with us want to do them. People with a special

need, interest, and/or resource get together at the Teacher Center. Our director, Corky Levin, andother staff support such efforts. We may spend small amounts of our general budget to pay people to pursue such an interest. Thus we pay someone $25 to do a workshop on making games, or on the use of cooking in the curriculum, or on sexism in education. Out of small, informal efforts, we often develop more formal projects, such as publication of books on games and on cooking.

We try to make sure that program development grows organicially out of the needs and resources of people involved with us, rather than as an arbitrary response to the fact that funds are available for a special project.

Corporations

It was suggested to us that we explore corporate giving as a source of support. Apparently, in some communities large corporations have a budget for community contributions. One advantage of corporate giving is that once a corporation gives to a particular agency, it is likely to continue that support year after year. Since corporations tend to be more conservative than foundations, they are less interested in innovation than in supporting stable, sound programs.

In order to find out about this, I went to see a man who has been a leader in the philanthropic community in New Haven. He is a lawyer who has been involved in fund-raising campaigns for many of the creative arts organizations in the New Haven area.

He told me that, in all his years of experience, he has never known any of the large publicly owned corporations in the New Haven area to support any individual community arts program, or other community project. The corporations give to the United Way, and possibly to the hospital, and then they stop. They are afraid that if they give to one small program, they will be deluged with requests from all the others.

Because of this advice, we crossed large corporations off our list of possible leads. I was grateful to be able to benefit from other people's experience, and not waste time in this area.

Even though the large corporations are unlikely to help contributing cash, many of them are able and willing to contribute in-kind resources. The phone company, for example, has its own printing shop, and will print brochures and pamphlets for local groups without charge. Many corporations contribute scrap materials to our recycling center.

I would be interested to learn from other teacher centers what their experience is with corporate giving in their communities.

Community Fund-Raising

Our Teacher Center has never put energy into fund-raising in the local community through mail campaigns, theater benefits, bake sales, rummage sales, or other volunteer-run fund-raising activities. Recently, we have begun to reconsider whether we should get involved in such efforts.

We are concerned about the time and effort it would take to organize a volunteer group to work on fund-raising. We have numerous people who gladly volunteer to help develop displays at the Teacher Center, to write books on curriculum ideas which we publish, and to spread the word about the Teacher Center. But the teachers, parents, and college faculty and students who have been involved with us are not the people in the community who like to spend time on fund-raising.

Although we keep discussing whether we should work to develop a group called "Friends of the Teacher Center," whose task would be to raise funds for us in the community, we have not yet come to the conclusion that this would be worth the time and effort it would take.

We have one idea which we may pursue this fall. This would be a series of neighborhood social gatherings as Teacher Center fund-raising events. We would ask people to give parties for their own friends and neighbors, at which we would be present to tell about the Teacher Center and solicit contributions. This idea appeals to us because it would also encourage people in neighborhoods to get together to talk about public education. It would be an effot in building networks of support for the Teacher Center and what it stands for; not just an effort to get money. It would also involve limited time and effort by Teacher Center staff and board.

It is possible that through the social gatherings we will find people who are willing to volunteer to work on fund-raising for the Teacher Center.

The ambivalence about community fund-raising is also connected with a hard-to-describe fear that somehow our "identity" will be adversely affected by the wrong kind of fund-raising effort. We want to be sure that teachers and parents who use the Teacher Center feel the place belongs to them.

In the long run, I expect that we will test out, in small ways, such as the social gathering, how we can gain the support of people with money and/or fund-raising time without losing the support and trust of teachers and parents.

Fees for Our Services

We have also been struggling with the question of whether to charge for our services. But in this area we have already made considerable changes in the past year. We have had to convince ourselves that it is legitimate to charge since we need this support in order to continue to offer high quality, valuable services. We still want to be careful so that our fees do not prevent teachers and parents who cannot afford it from using our Center. We want to learn more about how the pricing structure affects who uses the Center, how they feel about the Center, and how well they make use of our services.

For the first few years, all our services to individuals were free. We did not even charge for coffee. The only exception was a tuition fee for our three-week summer workshop. We did charge nominal fees to school systems who contracted with us to do in-service training workshops, or to a Head Start State Training Center which hired us as consultants.

In the past year we have begun to charge small fees for most of our activities. We charge $2 per person for a workshop, 25¢ for coffee, $2 per bag for

recycled materials, and a small mark-up for books, homemade toys and Teacher Center t-shirts in our bookstore. We have published a book called Using Foods, and obtain tiny royalties from the publisher and more for those we sell at the center (Using Crafts, Using Space, and Using Games will be going to press soon). We charge $25 when a college class or other group comes to the Teacher Center for a field visit, and $50 if we run a workshop for a visiting group. We do not charge teachers, parents and students for the use of the Cener on a drop-in basis in the afternoon, nor for individual meetings with our advisors during that time.

These fees do not begin to cover the costs of keeping the Teacher Center open and staffed. Thus now, when we negotiate tracts with larger organizations such as school systems, colleges, and government agencies, we are beginning to insist on a price that pays not only for the services of a particular advisor on a particular day, but also for the use of the total Teacher Center resources. We are beginning to ask people to pay for the use of our space, curriculum materials, equipment, for the director's time in coordinating any activity, and for something toward the general Teacher Center program. We try to emphasize that this is not the same as "overhead"; the availability of the Teacher Center to staff of schools, college students and faculty, etc., is a service that systems must pay for.

Since every insititution has different rules about what they can pay for and on what basis, this tends to be a difficult area to handle. Also, since we are still new at this, we are working to find out what kinds of pricing for our services makes sense in terms of the "going rate" among other organizations, and what appears to be unreasonable. I want to spend more time talking with other groups which are involved in contracts for services to find out how they deal with these issues.

Colleges and Universities

We want to find out more about how we can collaborate with local colleges and universities, and how these joint efforts can help support us. In the past we have worked informally with colleges and universities, and have developed a favorable reputation and many allies.

I have appointments with a grants officer in one college and an Assistant Dean of Education in another to explore how we can work together. I want to explore whether we can jointly offer credit for courses at the Teacher Center, and how the tuition for such courses would be divided between the colleges and the Teacher Center; whether the colleges can pay for the use of our facilities by students and faculty, even without credit; whether the colleges and we can jointly apply to federal, state, or foundation sources for grants or contracts.

One reason this kind of collaboration is important is that many sources of federal and state funds are available only to colleges and universities and/or to local school systems, but are not available directly to non-profit organizations. Yet a non-profit group like the Teacher Center can be a sub-contractor in many such grants. It is likely that an alliance with a teacher center might strengthen the ability of a college or school system to obtain a special grant or cntract.

Final Remarks

We have been thinking hard about our relationship with money. We want to have enough money to have the freedom to carry out the programs that we believe in; but we want the autonomy and freedom to make careful decisions about our priorities, our use of resources, our style of working.

It also appears that the strategy of looking to many diverse funding sources may help preserve our autonomy. We are trying not to be dependent on any one source for our future survival.

We have been fortunate to have the grant from the New Haven Foundation to pay for my time to work on these issues. We are not sure whether the half-time, six-month assignment will be enough, or whether we need a program development/fund-raising person as a permanent part of the Teacher Center staff.

This work reminds me of detective work. There is a lot of drudgery, investigating many possibilities, before one finds an occasional clue that may lead to a solution. And as in the real world, the mystery may never be solved. But there is also the excitement of finding out about a new resource, finding an ally in an unexpected place, seeing a way to put pieces together that will enable someone to support us.

We are eager to hear from other teacher centers to learn of their experiences, discoveries, and choices in planning their funding strategies.

RESEARCHING CORPORATE GIFTS

Excerpts reprinted, with permission from Jack Shakely, from The Grantsmanship Center News, "Exploring the Elusive World of Corporate Giving," Issue 21, July-September, 1977, pp. 46-54. Copyright (c) 1977 by the Grantsmanship Center.

A few months ago, a packed audience at a National Council on Philanthropy meeting heard Henry Brett of Chevron discuss "The Appropriate Way to Approach Corporate Donors." Approach corporations confidently, Brett said, but first do your homework, get to know the corporation, the personalities, the corporate interests, their programs and goals as outlined in their annual reports (emphasis is mine). Brett went on to say that grant seekers should learn what the corporations are trying to accomplish through their donations made locally, regionally and nationally.

He finished by saying that the interest of the stockholder governs contributions, not the interest of management. While corporations strive to be community-oriented they must also be conscious of how their actions will impact upon the stockholders. Brett's comments were followed by those of some nationally-known fund raisers who said that, indeed, this was pretty much applicable across the board in the area of corporate giving.

Sound advice, except for some nagging inconsistencies. First, not one corporation in five makes any mention whatsoever of its corporate philanthropy in its annual report. Of the hundred or so I studied, only a handful noted specific areas of interest and only one (Equitable) mentioned the exact dollar amount given away. Not one mentioned who the potential grant seeker should contact.

Second, even for those corporations with foundations, researchers must, in most cases, do a blind search through the 990 annual reports. Because most corporations keep minimum assets in the foundation (it is not unusual to see a corporate foundation with assets of $200,000 giving away $300,000--the company flows the money through the foundation but doesn't leave it there), hundreds of corporate foundations were not included in the last edition of The Foundation Directory in that they did not have the minimum $1 million in assets nor grants in excess of $500,000 to be included.

Third, some corporate foundations aren't named for the corporation at all, but for the founder of the corporation or some name pulled out of a hat. Want a grant from the Consumers Rock and Cement Company? Go the the Harney Foundation. The United Tanker Corporation? Try the International Foundation in New Jersey.

Do your homework with corporate philanthropy? Good idea, but consider this: corporations are not required to divulge their specific contributions to their stockholders, the general public or the Securities and Exchange Commission. Even IRS doesn't receive such information as a matter of course (but can request it during an audit). A spokesperson of a major national auditing firm told me that seldom will the auditing firm itself request specific contribution information during preparation of a company's audited financial report. Even when the auditor requests such information, it is not always forthcoming.

As far as stockholder influence on corporate grants, Deep Pockets had some comments on that.

Deep Pockets: Of all the myths surrounding corporate philanthropy, this is one of the most widely held. There is no basis in truth. It's important to remember that public utilities, mutual insurance companies and family-held corporations don't have stockholders, so we can discount them.

"For those corporations, that have stockholders, let's look at how they work. Cities Service Corporation, the oil company, has over 135,000 stockholders, yet fewer than 150 showed up for the last annual stockholders' meeting. This pattern is not unusual at all. As you noted, the SEC does not require any philanthropic information in the annual report to stockholders, so the vast majority don't know where, or if, the corporation is giving. Corporations are controlled by management, pure and simple. When corporations change presidents, it makes headlines the same way a change in presidents in France or Mexico does.

"Add to this the new, stiffened SEC regulations on proxy fights (if a non-management resolution fails to get at least 1 percent of the stockholder votes, the group bringing the resolution must pay all costs; if the resolution does not get at least 3 percent of the votes, it may be excluded for five years, and at the second hearing it must receive at least 6 percent or it can be excluded again) and you see that management is in a very powerful position.

"But perhaps the most important concept to bury the 'stockholder power' myth is what is known as the "Wall Street Rule.' You see, people (and universities and mutual funds) don't buy stock in a company because they are interested in the way that company performs on the stock market. If the stock goes up, that's good, if the stock goes down, that's bad. The Wall Street Rule says if you don't have faith in the company, sell your stock. Believe me, if management likes mental health and tap dancing, the corporation likes mental health and tap dancing. Can you imagine management writing a letter to stockholders saying, 'We give to our Alma Mater and we think we should give to yours. Send us the name of your college and we'll send them a check.' "Now as far as researching corporations is concerned, a person should start with his or her own agency. Find out how many employees of the ABC corporation used the agency's services last year, project how many will use them this year and then tell the corporation exactly that. To help people learn how to find out what a corporation will fund, why don't you pick a corporation that doesn't have a foundation and research it. If the man from Chevron suggested you look, why not look at Chevron? I'll give you a hint: you may not find anything listed under the name 'Chevron'; last year it was called Standard Oil of California."

* * * * * * * * * * * * * * * * * * *

The next morning I set out for the library at the UCLA Graduate School of Management, one of the largest corporate reference libraries in the world. My first stop was the Standard and Poor's Register of Corporations, Directors and Executives. This register which comes in two volumes, contains basic information on most major corporations. Volume one contains information on the corporation itself; volume two gives brief biographical notes on the key executives.

Taking Deep Pockets' advice, I looked under Standard Oil of California instead of Chevron. There it was...but what was it? At first, the information seemed helpful. There was the address of the main office, 225 Bush Street in San Francisco, and there was a telephone number: (415) 894-7700.

So far, so good, Next I ran down the list of executives to find out who within Chevron is responsible for contributions. "This is really too easy," I thought, "I already know Henry Brett is my man." But when I went down the list, no Henry Brett.

So with whom, if I didn't already have Henry Brett's name, should I make my initial contact? There was the chairman and chief executive officer, H.J. Hayes. Maybe I should start with him (or was it her? The book didn't say). Of course, there was the vice chairman, G.M. Keller. If G.M. was in charge of philanthropy, would he/she be hurt if I want over his/her head? What about the president, J.R. Grey? Doesn't anybody use first names in this company? There was a vice president for public affairs, G.T. Ballou. I bet G.T. has a hand in this somewhere, as does H.R. Hammerman, who is head of advertising. I was accumulating a great deal of information, but very little knowledge.

Slightly daunted, I moved to volume two. The only person listed was H.J. Hayes, and from the bio I found that H.J.'s first name is Harold, he was born in Ft. Worth and attended Texas A & M.

I then moved to the reports. Every corporation publishes three reports that are available for public inspection: the 10K report, a no-nonsense compilation of all the financial dealings of the corporation during the past year (all the "substantial" financial dealings, that is); the 8K report, which is a quarterly summary similar to the 10K; and an annual report to stockholders (ARS), which is the slick, handsom piece most of us think of when we think of corporate reports.

I tried the 10K first. I found that the company's net earnings for 1975 were $772,509,000. This was down, I was told, from the $970,018,000 earned in 1974, but was still the second best year in the history of the company. Nowhere was there a mention of the amount of contributions, if any, made by Chevron. When you have earnings like that, things don't become "significant" until they reach $40 or $50 million.

The 8K was no help either.

The annual report to stockholders was different. At the very end of the narrative portion of the report were two small paragraphs under the heading "Helping Through Contributions," or something like that. The company makes grants, the report said, in the areas of education ("to universities and colleges for research, scholarships and general support"), youth ("to such organizations as Scouts, Community Pride, Urban 4-H and minority training programs"), the arts ("local symphony orchestras, music education for schools, art organizations and cultural radio and television broadcasts"), health ("for local charities, hospitals, health research and traffic safety programs") and conservation and beautification (for "parks, wildlife and botanical societies, energy conservation studies and land gifts for recreation, along with expenditures for beautification of company facilities"). Nowhere was there any mention of how much money Chevron gave away, the types of agencies they would or would not consider, how, when or where applications should be made, and still no mention of Henry Brett. Curiously, too, although Brett said that his company's purpose "is not to give to nonprofits but to give to people through nonprofits," the annual report listed not people and programs, but nonprofits.

I decided to go to the source and dialed the number I found in the Standard and Poor's Register.

"Good morning, Chevron, USA."

"I'd like to speak to someone in charge of contributions, please."

(pause) "Just a moment." (longer pause) "That would be Mr. Brett. His phone number is 894-2566."

I contacted Henry Brett, who turned out to be very articulate, very sympathetic and filled with the desire to stay off the record. He did say for publication that Chevron gay away "around $5 million" last year and they don't give away gasoline. When I asked how people should attempt to find out more about Chevron's philanthropic interests and goals, I was told that "some people call, some people write us and ask us and some people come in."

I'm not picking on Chevron and I'm not picking on Henry Brett. The fact is there is very little sunshine in the world of corporate philanthropy. There is a shroud of mystery over the philanthropic efforts of most corporations. Many corporate executives act like foundation executives did 20 years ago--in despair because their good deeds go unnoticed and in fear that too much exposure will send a hoard of grant seekers down on them like avenging angels.

Even some of the best corporations seem to go out of the way to keep you in the dark. The Oscar Mayer Foundation tells grant seekers that grant "preference is given to community funds, hospital building campaigns and welfare agencies which operate in those cities in which the processing plants of Oscar Mayer & Co. are located." But it does not mention what those cities are. The Cabot Foundation in Boston says that unrestricted grants are primarily directed to those regions where Cabot employees are available to maintain direct contact with grantee agencies. Again, the Cabot Foundation lets you guess where those regions are located. Researching corporations is like playing Twenty Questions.

As a result, most donees haven't the foggiest notion what a corporation really wants and often fire grant requests from the hip. The stockholders don't know anything, except what they learn from the platitudes in annual reports. More sadly, most corporation employees don't know what their corporation is doing, and whatever sense of pride or goodwill that the employees might have felt is lost.

Even scholars and journalists get lost. Marion Fremont-Smith, in her book Philanthropy and the Business Corporation, wrote, "There is clearly a need for more precise information on the extent of corporation philanthropy... one can note overall growth and can be assured that the large companies are making substantial contributions in terms of dollars, but beyond that it is difficult to be precise."

Yet as imprecise as researching corporations is, Henry Brett is right. You should try to understand what management of the corporations is thinking. "And stop lumping us all together," Deep Pockets said, "Perhaps one out of five proposals I get these days from educational institutions is to establish some sort of free enterprise chair or sponsor some seminar called 'The Future of Tomorrow is the Corporation of Today.' Isn't this fostering the very process we're trying to get rid of? Who do they think they're kidding?"

One way to find out what corporate management is thinking is the most obvious way: call them on the telephone. Unlike most foundations, corporate executives reported feeling comfortable with telephone inquiries or personal visits. Be careful, however, that a casual inquiry doesn't become a full proposal review.

A common mistake made by inquiring grant seekers is to assume that corporate giving is housed in the public relations department. This is true only about 25 percent of the time. If your initial request to be connected with the person in charge of philanthropy meets with an inappropriate response ask to speak to the president. The president may not be the right person (again about 25 percent chance of being right), but the president knows who is right. In fact, you may never talk to the president, so remember to consider the president's secretary as your ally.

To understand what a corporation believes, you need only find what management believes. A source of information about management is Who's Who and Who Was Who, both nationally and regionally. Here you will find hometown, school, awards, offices, boards and other community connections that management has. Who Was Who is important because even though a company founder may be long dead, his predilections may still linger. Kodak would be reluctant to give to a Rochester agency that George Eastman hated, though he died years ago.

An important but seldom used research strategy is trying to up corporate executives who sit on private foundation boards with the interests of the foundation. If a corporate executive sits on two foundation boards and they are both strongly involved in arts funding, chances are the executive's corporation is also inclined in favor of the arts. The best way to check this is in the index of the Foundation Directory, which will give you a list of all donors, trustees and administrators of the major foundations in America.

In all corporate research, it must be remembered that corporate philanthropy is among the most provincial: the closer your agency is to the corporation, the better your chances of funding. Most corporations will not give outside of their plant cities. An obvious part of your corporate search must be done at home. Check your local chamber of commerce--many publish directories of local corporations. If there is a university with a business school nearby, it will invariably have an extensive library of corporate information, including corporate annual reports in many cases. (I seldom found much of merit in the annual report to stockholders, however, and I don't feel you should spend a great deal of time securing them. They often tell you more about the corporation's advertising agency than the corporation. On the other hand, don't ignore them completely. They do give a flavor of the corporation.)

Of course, for those corporations with a foundation, your research is greatly simplified. These corporations must publish a form 990-AR detailing every grant made by the corporate doundation, including the recipient, the amount and purpose of the grant. These 990-AR's are available for public inspection as are all private foundation reports and may be found in Foundation Center collection libraries in some 60 cities across the country. (See Researching Foundations: How to Identify Those that May Support Your Organization, which is available as a reprint from the Grantsmanship Center.)

The Handbook of Corporate Social Responsibility (see bibliography) is another source of information, but must be viewed with a gimlet eye. Hundreds of examples of corporate philanthropic endeavors are listed in this book, but not only is the book now seriously dated (mostly 1970-1972 information) most of the information was written by the corporations themselves and often portrays a company less as it is than as it would wish to be.

For all this research, you still may not know much more about the corporation than you did before, but at least you can be candid when you say, "I've researched your company as thoroughly as possible and feel this project is right down your alley."

APPROACHING CORPORATIONS

After your research is completed and the name of your corporate contact has been established, there still lies ahead the challenging, sometimes chilling, process of requesting the support.

As mentioned earlier, corporations feel comfortable with the personal approach. This "hands on" grantsmanship is typical of the way many corporate people like to conduct all their business and they are very good at putting subtle power factors into play. Contrary to popular opinion, many corporate decisions are made on impulse, and grant making is no exception. Clement Stone, the flamboyant Chicago businessman, is said to have made up his mind about funding a project based on the eye contact of the applicant and the manner in which he or she approached the desk.

Corporate power can be exercised in many ways, so be prepared. The president of a large national public relations firm has his office furniture designed so his chair is almost a foot higher than those of his (intimidated) guests.

Because corporate giving is so local in scope, the likelihood of a personal approach is better with corporations than with most large foundations or federal agencies. This can be both a strength and a weakness. The grant seeker's access to corporate people is high, but the skill involved in personal contact fund raising is not within everyone's grasp. The meek may inherit the earth, but their chances of securing corporate grants are not good.

Although your first meeting with a corporate executive may appear to be an information-sharing "let's rap" session, be prepared for a total oral presentation. There may not be a second. Corporate executives pride themselves on making decisions and the chances are good that some decision will be made at the initial meeting. Be ready to back up any projected employee benefits with facts and statistics. Always request an exact dollar amount. Any hesitancy in this area will be viewed with suspicion. Moreover, you should be prepared for the almost inevitable question, "What have other corporations given?"

An additional tip from an experienced corporate fund raiser: "Never give them something to read while you are talking. When people are asked to read and listen at the same time, they don't do either very well."

One way to make the personal visit less intimidating is to bring a friend, hopefully one that has some personal or peer relationship with the corporate executive. This is an old ploy in diplomatic relations (if they have one negotiator you bring two, if they have two, you bring three) and serves one very important function: it keeps the conversation going. You never know how long 30 seconds can be until you've weathered a half-minute of silence in the office of a corporate executive.

Even when contacting a corporate foundation located halfway across the country, the personal touch on the local level is still very important. If a corporate foundation is interested in your proposal, often the foundation executive will contact the local branch or plant manager in your area to find out something about your agency's background and community standing. If you contact the local manager prior to making your submission to the corporate foundation, you may find that a positive response locally will go a long way in influencing a decision at the corporate headquarters. If the local manager is willing to write a letter of endorsement, so much the better.

TYPES OF CORPORATE SUPPORT

As every corporate philanthropist is quick to tell you, corporations have a lot more to offer in support of charitable organizations than money. And in the area of inkind gifts, corporations have the potential to be more creative than any other area of philanthropy.

There are six basic areas of support you should consider from corporations:

1. Outright gifts and grants.

As mentioned earlier, outright gifts from corporations tend to be smaller than foundation grants. Many corporations still feel the "good will" generated by a large number of small gifts outweighs large grants made to a few projects. Generally, those corporations without foundations tend to give more for general support, those with foundations tend more towards programmatic grants. It should also be noted that many corporations, including some of the largest, allocate corporate gifts to a geographic area in direct proportion to the number of employees living in that area. If 20 percent of the total Xerox work force lives in Dallas, for example, about 20 percent of the Xerox fund's grants will go to the Dallas area.

According to Ed Booth of Cummins Engine, outright gifts can themselves be divided into four groups:

- The check out the door--always small gifts, usually with little planning or concern that the gift falls within philanthropic objectives. Purchase of Girl Scout cookies, a pledge to the Jerry Lewis telethon or a ticket to a $100-a-plate fund raiser fall within this category. Nobody is particularly proud of these gifts, but nobody begrudges them either.

- The general support contribution--these are gifts made to agencies more for their overall respect or good work rather than a specific project. Most corporate gifts to higher education, especially alumni

associations, fall under this category. Newer or less established agencies may find this type of support hard to come by unless a direct link between company and agency can be established.

- Programmatic grants--grants to specific problems. These are the grants that corporations with defined philanthropic objectives prefer, because projects are identifiable, time limited and can be evaluated.

- Corporate-sponsored projects--a rare breed, these are projects that the corporation initiates, either by selecting an existing nonprofit agency to carry out the project, such as driver safety research conducted by an automobile insurance company or an experimental farm run by a producer of chemicals and fertilizers.

2. Matching gifts by employees

Historically, this had been the exclusive province of higher education, although many corporations are now extending the matching gifts concept to arts groups, hospitals and the public media. A corporation with such a program matches the contributions of its employees to certain types of organizations. According to the Council for the Advancement and Support of Education's National Clearing House for Matching Gifts Programs, almost 700 corporations now have some sort of matching gifts program (CASE has a brochure which lists those corporations--see the bibliography).

Some companies match dollar for dollar up to a set figure, while others, notably Exxon with its new three-to-one program, more than match. This type of giving is growing in popularity, both because it is seen as an employee benefit and because it takes the heat off the corporation. As far as recipient agencies are concerned, however, the matching gifts concept is still a very exclusive club.

3. United Way

Although one might argue that this is less a type of gift than a type of recipient, the controversial United Way/Corporate connection must be seen as a process as well as a product. Not only does approximately 50 cents out of every corporate philanthropic dollar go to local United Way, the amount of time spent by the company's personnel to conduct company campaigns is enormous, as is the ancillary costs of the campaigns, such as payroll deduction costs, accounting, special flyers, posters, rallies, etc. Although the United Way constantly proclaims low fund-raising costs, when you compare the corporate outlay of time, money and facilities to the actual funds received by United Way agencies, United Way's fund raising costs are considerably higher than you may have been led to believe.

Not only is corporate philanthropy the playground of the United Way, the United Way is the playground of corporate executives. In almost every city, it's the big corporate executives who run the United Way campaigns. "When David Packard took over the United Way in Palo Alto, contributions jumped 15 percent," Frank Koch said. When Simon Ramo (he's the R in TRW) headed the Los Angeles campaign, corporate executives all over Southern California were

scurrying for cover to avoid his media blitz and personal strong-arm fund raising. Nobody can twist the arm of a corporate executive like another corporate executive.

Unfortunately, many of the corporate people involved with United Way fund raising lack the ethics and professionalism that raising large sums of money requires. In Chicago, for example, there has been an unwritten law that companies who give $30,000 or more to the Crusade of Mercy (Chicago's brand of United Way) will not be "bothered" by member agencies of the Crusade for funds during that year. ("Excuse me, I've just discovered a cure for cancer. Would you support my program to pass this miracle along to the rest of the world?" "It's a miracle I don't throw you out on your ass. I was told you'd stop pestering me if I gave my fair share.")

Many corporate philanthropists are questioning the United Way, but seldom out in the open. "You give because you are expected to give," Milton Moskowitz said. "If you don't you're going to get killed." Maybe killed is too strong a word (and then again...) but United Way pressure on a company can be a terrible thing to watch. In turn, company pressure on individual employees can be equally fierce. On a recent local television talk show on corporate philanthropy which invited viewer call-ins, 75 percent of the calls we received asked how to legally deal with company pressures to sign forms authorizing contributions to United Way to be deducted from paychecks.

Corporations may question the United Way, but getting out of the relationship is another matter. Many Los Angeles corporations that made gifts through Associated In-Group Donors (AID), which has been a rival funding source of the United Way for many years, found that their money was being turned away by agencies that also get money from the United Way. These agencies were being forced to turn the funds away because to accept them would jeopardize their continued membership in the United Way. The United Way works hard to remind corporations that their way is the only way. Some corporations go so far as to refuse additional, specific funding to any United Way agency. This is probably one of the dumbest ideas ever perpetrated on philanthropy, but the United Way indulges it.

Of growing concern is the reluctance of most United Ways to accept new agencies. According to David Horton Smith, a Boston College sociology professor and former head of the Association of Voluntary Action Scholars, more than 90 percent of the agencies receiving funds from the United Way have been supported by the United Way for more than 10 years. United Ways in many cities, citing declining support, have refused to accept any new agencies whatsoever. This had led many people to challenge the corporate policy of allowing United Way solicitation within the company while not allowing other agencies and united appeals the same privilege. Most corporate executives, however, resist any change. One corporate executive said, "Just for openers, we have a United Way rally every year. This lasts almost half a day. If we had a dozen drives with a dozen rallies, we wouldn't get much work done."

Without corporate support, the United Way would practically disappear. For this reason, whatever corporations may think of the United Way, the pressure to remain part of the "team" will be extreme for years to come.

4. Released staff time/volunteering.

In a study done for the Filer Commission, the Conference Board reported that of almost 400 corporate presidents queried, 92 percent said they did philanthropic work on company time, with 25 percent stating they spent five hours or more per week in such activities. Although as noted earlier, a great portion of this time must be attributed to United Way activities, the concept of giving people as well as money has become very attractive to many corporations.

There are three ways corporations provide this people support. The first is a company incentive program based on the IBM Fund for Community Services, where the company will financially support community organizations in which an IBM employee is a volunteer. To get the funds, an employee writes a request that describes the project, the amount requested and the employee's involvement in the project. Ninety percent of all employee requests are approved.

The second is the loaned executive program, such as the Xerox Social Service Leave Program and the IBM Faculty Loan Program. Under such programs, an employee is released to work full time with a nonprofit organization or community group for periods of up to one year while receiving full pay from the corporation. For obvious reasons, the number of executives available is limited and competition is stiff. This concept receives a tremendous amount of publicity and more corporations are trying it out, but some corporate people are whispering that some loaned executives never come back and many who do have a hard time catching up with their associates who spent their year trying to move up.

The third way is a corporate-wide volunteer effort focusing all employee volunteer efforts on a particular agency or programmatic area. Again, Xerox leads the way here, with its Community Involvement Program. Many corporations such as Bank of America, GTE Sylvania and Samsonite have been working with professional volunteer coordinating groups, notably the Involvement Corps (see list of resources), to set up corporate-wide volunteer programs. This concept has the obvious advantage of allowing employees to understand and participate in the corporation's philanthropic program while at the same time providing an arena for employees to get together away from the office.

5. Gifts in kind.

The 1969 Tax Reform Act put a terrible dent in corporate gifts from inventory, but fortunately the 1976 Tax Reform Act has straightened things out a little. Prior to 1969, corporations were allowed to deduct the market value of a product given to a charitable organization. Pharmaceutical companies found this especially attractive, and many free clinics, hospitals and international relief programs were kept solvent as a result. The 1969 Tax Reform Act wiped out this advantage overnight, allowing corporations to deduct only the actual manufacturing cost of the product donated. While this did not stop corporations from making gifts from inventory, it did remove the tax advantage, which is the prime mover for corporate philanthropy.

The 1976 Tax Reform Act has put back some of the advantages the 1969 act took away. Now corporations are allowed to deduct gifts from inventory based on the cost of the property plus one-half the appreciated value of the property (the difference between manufacturer's cost and retail cost) or twice the cost,

whichever is less. Although this isn't as advantageous as in the pre-1969 days, it is now more attractive for a corporation to donate an inventory item that declare an inventory loss, which was the corporation's other choice under TRA '69. In order for the corporation to take the new deduction, however, the recipient organization must write a letter to the corporation stating that it is a nonprofit tax-exempt organization, that the property will not be re-sold and that the property will be used for the furtherance of the exempt purpose of the organization (actually, the act says "exempt purposes for the care of children or the ill or needy," but this restrictive clause will probably not live through its first court test).

A word of caution on gifts of inventory: many corporations, including Sears, Xerox and Chevron, have strict internal guidelines forbidding donations out of inventory. "Xerox is in the business of selling Xerox machinges, not giving them away," said a company spokesperson.

Gifts of inventory barely scratch the in-kind surface. Loaning the corporate facility for meetings, seminars and special events can not only provide some plush surroundings for your meeting, it can save hundreds of dollars that it would have taken to rent similar space at a hotel (or, sad to say, university). Corporations usually buy in large quantity, and thus often get very attractive discounts. See if you can "piggy-back" your purchases through a corporation. Even after reimbursing the corporation, you may save a bundle. Got a brochure that needs to be printed? Ask a corporation to print it as it prints its annual report. You may get a four-color brochure for free. Be creative. "We like to be approached by nonprofits for things like this (printing, group purchase). It shows us the agency is trying to save money. We understand that," said Deep Pockets. There are a number of other things that one can get from businesses--both large and small. Some ideas are noted on pages 50-51. The key is to be creative.

6. Program-Related Investments

The idea of program-related investments has been sneaking up on corporations and foundations for some time now, and when it is finally understood and accepted, it could change the face of philanthropy. Simply stated, a program-related investment is a loan or purchase of stocks or bonds in an organization that may be rather high-risk financially but which is working in a program area that is similar to the philanthropic priorities of the corporation or foundation. If the agency pays back the money on schedule, it is considered an investment. If the agency fails, it is considered a grant. The Urban Investment Program was an example of program-related investments, as are the successors to UIP, the Minority Enterprise Small Business Investment Companies. So are New York Big Mac bonds, for that matter. Community redevelopment agencies, economic development agencies, hospitals, schools--all could benefit from program-related investments. Only a handful of corporations are now involved in program-related investments and you may encounter a blank stare from the corporate executive when you suggest it, but as the kindergarten teacher told tha class as he discussed the difference between burgundy and bordeaux, "You can't use this information now, but bear it in mind."

PROPOSAL WRITING OUTLINE

By

Donald R. Nelson

and

Grant Shumway

PROPOSAL WRITING OUTLINE

I. Proposal Summary

A. It should be a concise summary of your proposed project (from one to three paragraphs in length).

B. It can be a part of a cover letter or a separate sheet.

C. It can be used as a screening device in the review process. (Remember, it creates a first impression, and is therefore very important.)

II. Introducing the Organization

A. This section should describe your organization in a way that enhances your credibility.

B. It should include descriptions of the following:

1. Board of Directors
2. Sources of funding
3. How the organization was started and when
4. Organizational goals
5. Unique qualities
6. Accomplishments of board members, staff, organization and
7. Support from other organizations/individuals.

C. It should focus on the connection between your interests and those of the funding source.

D. It should be long enough to give relevant information, but not so long that it is boring or appears to be "bragging."

III. Problem Statement/Needs Assessment

A. With what question or problem is this project concerned and why is the project being proposed?

1. Supply information that will help the reader to understand the setting in which the problem occurs.

2. Describe what in your setting has led you to work on this problem. Include any work already done.

3. Support/justify the significance of this project to your organization.

4. Discuss project's wider implications, i.e., what applicability will the project have beyond the time and scope of the funding request?

B. Break the problem down into its solvable parts. (Otherwise, you can leave the impression that no amount of money can solve it.)

C. Document the problem; give evidence of its existence.

D. Show that the project is workable in terms of time and money.

IV. Program Objectives

A. Write specific, measurable program objectives; use behavioral objectives guidelines.*

B. Distinguish between methods and objectives. The following statement describes a method, not an objective:

> "The purpose of this proposal is to proivde day care services to the children of low-income, working mothers."

C. When you use figures, be able to support them.

D. Explain the connection between the problem statement (Section III) and the stated objectives.

V. Methods/Program Design

A. Describe the activities you will conduct to accomplish objectives, how these activities will be organized, and who is needed to carry them out.

ACTIVITIES - ORGANIZATION - PERSONNEL

This should include an organizational chart showing how the project staff is organized. Brief job descriptions of key personnel also should be included.

B. Document why the choices you made above are the best choices; remembering that funding sources are interested in the least expensive method to get the job done. Example: If the project calls for a psychiatrist on staff, justify why a psychiatrist rather than a social worker is necessary.

C. Show evidence that you have considered alternatives. This shows a knowledge of the field and it substantiates your choice of methods.

D. Outline the time needed for:

1. Implementing the project

2. Project activities for the period for which you are requesting funds. It is often helpful to show activities beyond the period of the funding request to show future program and funding possibilities (see section IX below).

*See Robert F. Mager. Preparing Instructional Objectives. Palo Alto, Calif.: Fearon Publishers, 1962.

VI. Evaluation

A. Evaluation design should relate directly to program objectives; it should provide a measure of whether or not stated objectives have been met.

B. It should be as objective as is possible for the objectives stated.

C. If possible, have the evaluation carried out by an outside "expert." It is even helpful to show that this outside expert has been involved in the evaluation design.

D. The evaluation process should begin with the beginning of the project.

E. The process should allow for periodic assessment so that corrective feedback can be given to the project.

VII. Supportive Services

A. What facilities and supportive services do you plan to use in your project. Supportive services could include testing services, equipment maintenance, consultation, etc. The listing of these can be particularly helpful if they will be provided free or for a minimal overhead charge by the organization.

B. Describe any planned cooperation with other organizations and include letters of agreement from those organizations.

VIII. Budget

A. Use a standard line item budget, normally broken down as follows:

1. Direct Costs

a. Personnel

(1) Wages and salarie
(2) Fringe Benefits
(3) Consultant and Contract Services

b. Non-personnel

(1) Space costs
(2) Equipment
(3) Supplies
(4) Travel
(5) Telephone
(6) Other (insurance, subscriptions, etc.)

2. Indirect costs

B. If a program budget is requested or desired, you will have to list major program activities and compute their costs. This will normally require consulting with experts.

IX. Future Funding

Foundations do not usually fund projects in perpetuity. Show how you intend to support the project beyond the period of the funding request.

MODULE IX

MODULE IX: ACTION PLANNING FOR PROGRAM GROWTH **TIME:** 3 HOURS 20 MINUTES

GOALS

- To enable participants to select the program strategy most relevant for their program and community needs
- To help participants design an action plan to implement that strategy after the training.

OBJECTIVES

At the end of this Module, participants will be able to:

- Identify their highest-priority program need and give three reasons for their selection
- Describe the growth strategy which would most effectively address that perceived need
- Write an action plan to implement that strategy within their own program and/or community
- Describe at least one criterion for measuring the success of that strategy.

MATERIALS

- Participant Manual
- Worksheets

MODULE IX	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. OVERVIEW OF MODULE IX	5 MINUTES	LARGE-GROUP LECTURE
2. ACTION PLANNING	1 HOUR 45 MINUTES	INDIVIDUAL EXERCISE
3. SMALL-GROUP COLLABORATION	30 MINUTES	TRIAD EXERCISE
4. ACTION PLANS	1 HOUR	LARGE-GROUP DISCUSSION

PROGRAM PLANNING

PROBLEM STATEMENT: State what the problem is, to whom, and for what reason. Cite any evidence or indicators which support your statement.

GOAL STATEMENT: State the long-term end-result desired.

WORKSHEET IX-1 Continued

PROGRAM ACTIVITY: Use one page for every program activity. Each activity should contribute to the accomplishment of one or more objectives. Describe the activity:

This activity related to objective(s) _____

TASKS: In order to implement the activity, the following tasks must be completed.

WHAT WILL BE DONE (in chronological sequence)	TO/WITH WHOM	BY WHOM	WITH WHAT RESOURCES	BY WHEN	WHEN DONE

WORKSHEET IX-1 Continued

OBJECTIVES: List and number all the short-term and end-results or outcomes desired. Each objective should logically contribute to the accomplishment of your GOAL. Objectives should be: (1) concrete and specific; (2) realistic and attainable; (3) time-limited; and (4) measurable. (How will you know the objective is achieved?)

EVALUATIVE QUESTIONS WHICH NEED TO BE ANSWERED	POSSIBLE METHODS FOR ANSWERING THEM	IS DATA NOW READILY AVAILABLE?	IF NOT, CAN IT BE MADE AVAILABLE?

MODULE X

MODULE X: PREVENTING BURNOUT **TIME:** 3 HOURS 15 MINUTES

GOALS

- To encourage participants to develop, extend, and solidify personal strategies for personal support and growth in the midst of organizational change and growth
- To review possible applications of the knowledge and skills transmitted through the training.

OBJECTIVES

At the end of this Module, participants will be able to:

- Identify at least three coping strategies which they can use for personal and organizational replenishment
- Identify the common symptoms of "burnout" at individual and organizational levels
- Identify one piece of knowledge or one skill which they intend to use as a result of the training
- List the major knowledge and skill areas covered during the training.

MATERIALS

- Newsprint
- Magic Markers
- Participant Manual
- Post-test
- Selected Readings

MODULE x	OVERVIEW	
EXERCISE	TIME	METHODOLOGY
1. INTRODUCTION	5 MINUTES	LARGE-GROUP LECTURE
2. IDENTIFYING SYMPTOMS AND CAUSES OF BURNOUT	20 MINUTES	LARGE-GROUP EXERCISE
3. COPING STRATEGIES	20 MINUTES	LARGE-GROUP EXERCISE
4. BURNOUT AS SYMPTOMATIC OF ECOLOGICAL DYSFUNCTION	30 MINUTES	LARGE-GROUP LECTURE/DISCUSSION
5. BUILDING IN BURNOUT PREVENTION	45 MINUTES	LARGE-GROUP EXERCISE
6. WRAP-UP/ REFRESHER	45 MINUTES	INDIVIDUAL AND LARGE-GROUP DISCUSSION
7. POST-TEST	30 MINUTES	INDIVIDUAL

STAFF BURNOUT AS A FORM OF ECOLOGICAL DYSFUNCTION

By

Jerome F.X. Carroll, Ph.D.

This article is reprinted, with permission, from Contemporary Drug Problems, Vol. 8, pp. 207-225, 1979. Copyright (c) 1979 by Aberdeen Press, Federal Legal Publications, Inc.

STAFF BURNOUT AS A FORM OF ECOLOGICAL DYSFUNCTION

Nearly all of us have either directly experienced "staff burnout" or observed its destructive consequences among our co-workers. What puzzles me so is that we who in the human services field are so well trained to recognize, treat, and prevent the emotional distress of others can be so insensitive and impotent in dealing with staff burnout among ourselves. In theory, you might expect staff burnout to occur less often or in less severe forms in the human services field, because its onset would be recognized sooner and experienced, effective treaters would be readily available to deal with the problem. Yet it is precisely here that the phenomenon occurs in its most virulent forms with distressing frequency and regularity.

My own view of staff burnout is that it is a form of ecological dysfunction since its "pathogenic location"/1/ lies primarily in the interaction between an individual and his work environment, although interactions with other ecosystems or environments also contribute to the extent they too are stressful and frustrate important human needs.

Typically, staff burnout involves a person with inadequate stress management and need-gratifying skills on the one hand, and a very stressful and need-frustrating work environment on the other. While burnout may occur in any line of work, it seems especially likely to occur in work which necessitates attending to and servicing the emotional needs of others.

Various writers, in describing staff burnout, have tended to emphasize either the individual's inadequacies/2/ or environmental sources of stress./3/ Most acknowledge both factors, with various degrees of "tilt" toward one or the other of these two points of emphasis.

Jones, for example, in stressing the individual role, describes staff burnout as "...the condition when you have given all you have and feel you can't give any more; when you have reached the point of frustration where solutions, even imperfect ones, are not presenting themselves; the beginning 'in a rut' state where ideas and solutions are at a standstill, are repetitive and freshness is gone."/4/

Earlier, Maslach had described staff burnout as "...something inside you goes dead, and you don't give a damn anymore"/5/ Ottenberg likened staff burnout to a form of "battle fatigue,"/6/ while Shubin described it as a form of "disillusionment" and "emotional exhaustion" leading to "total disgust with one's self, humanity, everybody."/7/ Pines and Maslach defined staff burnout as"... a syndrome of physical and emotional exhaustion, involving the development of (a) negative self concept, negative job attitudes, and loss of concern and feeling for clients."/8/

Freudenberger assumed a mid-way point between the individual and environment; while concurring that staff burnout means "...to fail, wear out, or become exhausted...inoperative," he also stressed the point that a whole agency can experience burnout and cited numerous environmental conditions that contribute to staff burnout./9/ Morris, in her study of staff burnout, also underscored both individual and environmental factors./10/

White, however, clearly and cogently attends to the environmental side of the equation, noting that "the term 'staff burnout' has been used to describe, in the aggregate, an innumerable list of personal and interpersonal problems that result from continued contact with high stress work environments."/11/ His "systems" approach to burnout focuses on "...the manner in which organizational structures, internal organizational relationships, and the organizational group's relationship with its environment effects the physical and emotional health of individual members."/12/

White also stresses the point that since staff burnout is "an interactional problem," it requires modification of both "...the high stress work environment and the individual victim's style of stress management."/13/

Smits, too, underscores the contribution of problems and inadequacies in the work environment (e.g., inadequate supervision and the failure of organizations to alter their structure and functions to accomodate change) in discussing staff burnout./14/

Symptoms of Staff Burnout

Physical. Among the most common physical symptoms encountered are: feelings of exhaustion and fatigue; being unable to shake a cold; feeling physically run-down; frequent headaches and gastrointestinal disturbances; sudden weight loss or gain; increase in blood pressure; sleeplessness; shortness of breath; and increased susceptibility to various illnesses, including the common cold.

Psychological. Among the more common psychological symptoms of staff burnout are: increased feelings of depression, exhaustion, hopelessness, disillusionment, boredom, being trapped in one's job, helplessness, self-doubt about one's ability to heal (effectiveness) and the value of one's work, isolation (aloneness), not being appreciated for one's hard work and dedication (being taken for granted), or simply being ignored; increased rigidity, stubbornness, and judgmental thinking; hyperirritability and quickness to anger; increased suspiciousness and distrust; loss of one's initial enthusiasm for the job, loss of charisma, and loss of control over the expression of feelings; change from optimism to pessimism, cynicism; change from basic acceptance and respect for clients to rejection and disrespect; change from being a creative, flexible thinker to a mechanical, petty bureaucrat; increased drinking, drug-taking, gambling; diminished control over such basic drives as hunger and sex; and a significant decrease in judgment and reasoning, including the inability to consider the likely consequences of certain acts.

Social. The most commonly observed social symptoms include: a significant decrement in the ability to relate to one's clients as individuals, especially in a constructive, friendly, and caring manner; people in treatment begin to be responded to in terms of labels or categories (e.g., the "fractured tibia in room 203" or the "D&A case that Murphy's treating"); generally withdrawing and isolating oneself from others; overbonding with other staff members, that is, seeking to satisfy one's most basic human needs (e.g., recognition, friendship, love, and sex) almost exclusively through contacts with one's co-workers; the severing of long-term relationships (e.g., through divorce); increased sexual promiscuity; increased interpersonal conflicts, both on the job and at home; centering one's life around the job (e.g., by working an inordinate number of

overtime hours and then "justifying" this behavior as a form of "dedication" to one's work and a reflection of just how "important" one is to the organization); just hanging around the institution after normal work hours, with no special purpose; and taking repeated risks that endanger one's physical and psychological health.

Systems symptoms. Among the more common systems symptoms associated with staff burnout are: first and foremost, a significant decrement in the quality of services provided to clients occurs, even though the organization's statistical reports may continue to "look good" or even "improve"; subsystems (e.g., divisions, departments, offices) increasingly interrelate in a distrusting, competitive, and hostile manner; bureaucratic "turf" becomes increasingly sharply defined and jealously guarded; authority conflicts emerge more frequently and with greater rancor; important organizational decisions are more frequently decided by an increasingly isolated, elitist group which, less and less, seeks meaningful input from lower-level staff; communications within the system are poor; and humanistic, friendly, and informal staff encounters are increasingly replaced by stereotyped fixed-role, formal, but "quite proper," staff interactions.

Other signs of staff burnout within the system include: poor staff morale, as evidenced by workers and management expressing increased feelings of mutual disrespect and distrust that may lead to both sides insisting that their respective rights, responsibilities, and relationships be legally codified; staff members arriving late or failing to show up for important meetings and appointments; and management spending more and more time away from the organization and otherwise reducing the amount of time it spends in direct contact with line staff.

Still other systems symptoms include: increased absenteeism, especially sick leave; higher staff turnover and a decrease in average length of stay on the job; fewer staff leave the organization amicably due to an increase in firings and/or forced resignations; assigning additional work responsibilities (e.g., administrative paperwork) without adequate compensation in pay and/or reduction of the existing workload; a salary structure and benefits package that is well below that available at other nearby organizations offering similar services; an inadequate or unreliable funding source (e.g., one which can not even permit annual salary increments to stay even with the annual rate of inflation); and worsening relationships between the organization and other human services delivery systems, funding sources, regulatory agencies, legislative bodies, boards and surrounding communities.

Who is Most Susceptible

There seems to be general agreement that the most susceptible people to experience staff burnout are those human services providers who: (1) work in a highly stressful work environment, especially one which requires that the human services provider work intensely and intimately (emotionally), over an extended period of time, with very needy, demanding, despairing, alienated, economically poor, politically powerless, and highly traumatized clients; and (2) those, who for many reasons (some conscious and rational, others unconscious and irrational), invest heavily in their personal self on the job--the "dedicated" or "committed" worker. Those who in Freudenberger's words, tend to "...take on too much, for too long, and too intensely."/15/

While burnout seems to claim an inordinate number of those who provide direct services to clients, it also occurs among administrative staff as well. Furthermore, as Freudenberger has observed, it is also possible for an entire organization to experience burnout./16/

In discussing susceptibility to burnout, only M.L. Jones thought to call attention to one of the largest groups of human services providers most susceptible to "staff" burnout: housewives./17/ Too often when the problem of staff burnout is considered, we tend to overlook those not working in formally designated mental health and rehabilitative facilities, e.g., housewives.

Presumed Causes

The pathogenic location of staff burnout already has been identified as lying in the interaction between the individual and his/her ecosystems, especially his/her work environment. The etiology of this form of ecological dysfunction, therefore, can be expressed by the formula S.B.=f(IxE), i.e., staff burnout (S.B.) is a function of (f) the dynamic interaction of many factors, both intrapsychic (I) and extrapsychic (E). Since this perspective implicitly rejects any overly simplified, single-factor explanations of burnout, its adoption lessens the likelihood that one would fall prey to "blaming the victim,"/18/ i.e., explaining burnout solely on the basis of the individual's alleged inadequacies.

Individual factors. Beginning with the individual (I) component of the formula, any and all factors or combination of factors within the "internal environment" or person that militate against performing his/her job under stress should be considered. All physical illnesses that lower the individual's energy level, strength, and resistance to stress would also be considered, as would all earned maladaptive behavior patterns (e.g., phobias, character disorders, alcoholism, excessive gambling, etc.) that have the same effect.

Inadequate education and training to do the job also constitute major personal factors contributing to staff burnout. Individuals with limited job knowledge and skills are especially vulnerable to burnout, since they must continually confront problems with which they are ill prepared to cope. They are also likely to feel "trapped in their jobs," since their present skills and knowledge do not qualify them for advancement.

The same can be said for those with limited insight. Such persons are likely to mismanage the dual problems of transference and countertransference commonly encountered by all human services providers. This usually results in therapeutic failure for the client and defeat for the service provider.

Examples include the individual, who because he/she expects and fears rejection from others, withdraws and/or seldom communicates his/her needs to others--this individual must live with an unremitting, desperate need for love, attention, and respect from others which usually means he/she will typically find it difficult to say no to others and/or let his/her clients go once treatment is completed.

Other examples include: a compulsive need to make retribution for past wrongs, typically associated with unnecessary and exaggerated personal sacrifices for the alleged benefits of others; overidentifying with clients to the point

of losing the basic ability to judge the rightness or wrongness of clents' behaviors; or, conversely, expressing just barely concealed contempt and hostility for the perceived inferiority of clients whose problems are very similar to those of the human services provider.

Perhaps the most damaging of all the dynamics associated with a negative self-concept is the inability or refusal of the insecure human service provider to seek assistance from others. As the demands of his/her job increase and stress mounts, this worker, fearing that his/her hidden inadequacies will soon surface for everyone to see and ridicule, has only one option; that is to redouble already over-extended efforts to get the job done. More often than not, this last gasp effort will fail, leaving the worker with but one thing to do--burnout.

Paradoxically and tragically, this inability to admit to personal limitations and seek assistance from others will not usually be seen as an irrational act. More often than not, it is viewed as a sign of "true dedication to one's job." Rather than getting help, the worker will usually be given the equivalent of "tea and sympathy"--a palliative treatment at best.

Systems factors. Systems factors contributing to staff burnout may be grouped into three categories: those inherent in the job itself; those associated with the work environment; and those in the other ecosystems or environments that impinge upon the worker.

With respect to the first category, it is generally acknowledged that those aiding people, especially the poor, who have "failed" to successfully adjust to society's model of "normality" (e.g., those working in state mental hospitals, prisons, the welfare system, remedial educational programs, etc.) have received minimal support from society. Thus public, as opposed to private treatment facilities are nearly always distinguished by overworked and undercompensated staff. In addition, clients finding their way into the public sector of the human services delivery system are typically afflicted with the most extreme forms of disability (e.g., the rate of schizophrenia is nearly always greater at public mental health treatment centers than at private facilities located in the same geographical area).

Thus the public service worker in the human sector is given the dubious task of healing the most disabled, powerless, and alienated members of our society. As a consequence, "treatment failure" is commonplace, and this repeated experience is a major contributor to staff burnout.

Another factor inherent in the work of the human services provider which often contributes to staff burnout is the use of staff under enormous internal and external pressure. The former stems from constantly having to examine one's motives and actions to insure that one is behaving in a "correct and proper" manner, while the latter comes from the unending scrutiny of clients who demand that those "who talk the talk, walk the walk," or in other words, practice what they preach. These two unremitting pressures have contributed mightily to staff burnout nearly everywhere such modeling occurs.

Still another inherent factor contributing to staff burnout is the constant demand that they provide their clients with a high degree of presence, caring

and healing. Day in and day out, human services workers are expected to fully attend to their clients' needs; hang on every word and gesture in order to discern cognitive and emotional meaning; offer unqualified respect and support, and most importantly, friendship and genuine concern. This constant "being there" and giving to others, especially very needy others, will eventually exhaust any worker's capacity to continue giving. Without some form of replenishment, the worker's diminishing ability to attend and to give to others is bound to lead to feelings of guilt (because "professionals" are supposed to be able to go on giving forever) and anger (When am I going to get mine?).

The second category of systems factors would include such items as the failure of the organization to attract and hire fully qualified people to do a job or to provide effective education, training, and supervision. Other illustrations of factors within this category include creating a work environment fraught with competition, distrust, nonsupport (both emotional and financial), and poor communications. The lack of opportunities for advancement within an organization, arbitrary and biased promotions and demotions, the exercise of dictatorial or elitist powers, and the failure to coordinate and integrate the work done by various components or subsystems within the organization constitute other examples in this category.

The third category pertains to other ecosystems which create their own adjustment demands and thereby help to overload the individual's stress management system. Included here are deteriorating relationships at home with one's companion and/or children; neighborhood problems (e.g., higher real estate taxes, vandalism, and theft); high rates of inflation and unemployment; natural catastrophies; racism, sexism, and other "isms"; problems at school; being moved to a new area, away from old friends and relatives; and loss of people within the individual's social network (e.g., due to death, divorce).

Treatment

Interventions that focus on the individual. Perhaps the most immediate need for the staff member suffering from staff burnout is relief from stresses on the job. This can be done in many ways (e.g., giving the person time off away from the institution, assignment to a different and hopefully less stressful job within the organization, or allowing other staff to pick up some of the person's workload). It is most important that supervisory staff insure that the person being granted time off not view this action as a form of weakness or failure; the same is true for the person's co-workers. If other staff are asked to pick up some of the burned out staff member's workload, they must be helped to do this in a cooperative, positive manner.

The importance of good physical health should not be overlooked in treating staff burnout. It is advisable to have a very thorough physical examination as well as personal counseling, in view of the destructive role of a negative self-concept in staff burnout. Therapeutic modalities that focus on stress management (e.g., relaxation therapy, desensitization, biofeedback, meditation, yoga, and assertiveness training) could be especially helpful. On the other hand, very stressful therapeutic modalities (e.g., marathon or encounter groups) should be avoided./19/

Additional education and training may also be beneficial, especially in conjunction with removal of the person from his/her immediate job situation. In pursuing this, a careful inventory of the staff member's training needs is vital and should address such areas as: expectations, values, and standards which the staff member is using to judge performance of duties (e.g., they may be unrealistically high); whether or not the person knows how to maintain a healthy and constructive distance in working with clients; and the ability of the worker to prepare written reports (many have never been adequately trained to cope with administrative paperwork).

Burned out staff members should also carefully and objectively examine sources of stress and sources of potential support or need gratification; they could then be helped to develop better stress management techniques and to more effectively seek and obtain the support and need gratification they need.

Treatment aimed at the work environment. The treatment of staff burnout entails making changes in the structure, policies, and operating procedures of the organization in order to mitigate or eliminate stresses emanating from the work environment.

White has identified a number of interventions, including: improving hiring procedures and on-the-job training; providing adequate nurturing of staff through such means as granting guilt-free time out periods, job changes, and recognition for personal effort; providing carefully graduated levels of responsibility for new staff; obtaining training outside the agency or from nonagency staff; encouraging and assisting staff to identify and achieve career goals and objectives; preventing the same individuals from always working overtime; insuring that staff are adequately compensated for their work, and if their workload is increased, increase salaries and/or decrease other aspects of the workload; and, for paraprofessionals who had been patients, formally marking their change in status from patient to staff./20/

It was Freudenberger,/21/ however, who suggested the ultimate intervention. When and if the organization as a whole showed signs of being burned out, he recommended closing down the facility for a period of time. Although at first glance this recommendation seems rather extreme, there are many ways this could be done and still satisfy minimal patient-care requirements for funding purposes. For example, the facility could host an activities day or an organizational shut down--at least in terms of business as usual.

Treatment for the nonwork ecosystems. Treatment directed toward nonwork ecosystems is much more difficult and risky to implement, but nonetheless important to attempt. If, for example, a major source of stress is the individual's homelife, the work agency could either offer the worker and his/her family marital counseling or refer them to an appropriate treatment facility, preferably with some financial assistance to defer costs.

Although no agency can single-handedly overcome societal "isms," each organization can do its very best to confront racism, sexism, "ageism," etc. as each of these social dynamics operates within its own system. Cleaning up one's own work environment strengthens the resolve of people to cope with "isms" in other ecosystems.

Prevention

As Smits remarked, "prevention is probably easier than treatment" where staff burnout is concerned./22/ In order to design an effective prevention program for staff burnout, however, it is essential to maintain the ecological dysfunction perspective. Staff burnout prevention programs that ignore the environment or the interaction between the individual and his/her environment will most likely result in failure. Prevention programs, therefore, must be multifaceted and address all of the components in the formula, S.B.=f(IxE).

The individual. With respect to the individual, Freudenberger,/23/ Jones,/24/ and Shubin/25/ advocated regular physical exercise as a means of maintaining one's health and ridding oneself of excess tensions and stress. Jones also underscored the importance of using such relaxation techniques as biofeedback to prevent a build up of tension and stress./26/

The value of training human services providers to effectively structure their time, both on the job and off, was also emphasized by Jones./27/ White expressed similar thoughts on the need to develop an ability to organize one's work in order to avoid overextending oneself on the job./28/ Along these lines, a number of writers stressed the importance of learning to set realistic goals, expectations, and limits for the job./29/

Ottenberg/30/ and Shubin/31/ stress the need for human services providers to learn the art of maintaining some distance between themselves and their clients while simultaneously responding in a personal manner to clients as individuals. Freudenberger/32/ expressed similar thoughts when he advised workers to be more cautious, self-protective and attentive to their own needs.

Replenishment. Teaching staff how to identify and better use their resources, strengths, and potentials is another effective prevention strategy to counter staff burnout. This approach is based on the work of Herbert Otto and his students, who developed numerous, creative group exercises designed to promote human growth and development./33/ I have used these exercises with human services providers to replenish that vital source of energy which permits them to continue to discern and respond to the desperate needs of their clients.

Too often in their jobs, human services providers are taken for granted; that is, they are expected to stand fast in a sea of turmoil, suffering, and pathos because they are "professionals." Their assignment is simple: give of yourself, over, and over, and over again.

Unless the person assigned the healing, nurturing role receives the same care and attention he/she so generously extends to those in need, sooner or later, that healer will falter and suffer burnout. Unfortunately supervisors of professionals seldom give as much attention to the art of "stroking" as they do to the art of criticizing someone's mistakes or shortcomings. Thus, human services providers are likely to be understroked and overstressed on their jobs.

For these reasons, I have developed a small group, weekend workshop program for human services providers to satisfy their basic need for recognition, concern, warmth, and acceptance--to replenish that healing energy force

which they continually tap in meeting clients' needs. Since their giving to clients is social in nature, so, too, their taking must be social, hence the use of small groups. As they give to their clients, so too they must receive recognition, acceptance, and concern from others without having to be anything but themselves.

Assisting people to get in touch with their inner resources, strengths, potentials, and beauty in a social setting marked by a high degree of acceptance, genuine concern, and sharing has tremendous healing properties. It replenishes and constitutes a powerful prophylactic against burnout.

The work environment. Nearly everyone agrees that strict limits must be placed on the number of hours staff can work in a program, and these limits must be rigorously enforced. Periodically rotating staff from high stress to low stress jobs and providing guilt-free time away from the job also have been advocated by nearly everyone writing about staff burnout.

Pines and Maslach offered the following recommendations: reduce the patient-to-staff ratio; shorten work hours by creating a shorter work shift, with more breaks; establish more part-time positions; allow more opportunities for time outs; and share the patient load, especially with respect to more difficult patients (e.g., those with multiple substance abuse problems and serious psychopathology as well)./34/

Pines and Maslach also recommend changing the function of staff meetings to permit staff to socialize informally and confer about problems, clarify goals, etc.; improving work relationships by developing support systems for staff; holding retreats for staff members (preferably away from the work site) where they can discuss their feelings about themselves, their patients, and the organization; training staff to become more aware of work stresses and to recognize signs of impending staff burnout, and to seek help; and more realistically training staff as to what to expect in their work./35/

White also directly addresses systems issues in discussing the prevention of burnout. He recommends: not adding more work unless additional compensation is given; obtaining outside consultations to guard against the stifling effects of ideological incest; encouragement of continuing education for the staff; and the development of formal rituals which permit the expression of affection among workers, especially those leaving the organization./36/

He also stresses/37/ the need to deal with nonwork relationships and activities that have a detrimental effect upon a person's work and/or the work environment of the agency; the need to prevent scapegoating of certain staff members; and the need to periodically reasses programs, policies, and practices (also advocated by John W. Gardner, in a different context),/38/ especially as people leave the organization.

Freudenberger recommended more careful selection of volunteers and a greater willingness to use volunteers to reduce the workload; training staff to recognize the difference between being overly dedicated vs. realistically dedicated; preventing staff from drifting apart and isolating themselves when they are most stressed and in need of support; and assisting overstressed administrators to learn to delegate responsibilities and functions, as well as to share their feelings (especially their negative feelings) with other staff./39/

Conclusion

Staff burnout must be viewed as stemming from the interaction of both debilitating individual and environmental factors which together detract from the person's ability to do his work. Treatment and prevention must be approached from many directions and at various level, hopefully, in a coordinated and well-integrated fashion. Staff burnout, simply stated, is not an individual disease. It is an ecological dysfunction and must be dealt with as such.

NOTES

1. D. Hayes-Bautista and D.S. Harveston, "Holistic Health Care," 7 Social Policy 7-12 (1977).

2. M.L. Jones, "Beyond Burnout," paper presented at Norristown State Hospital In-Service Training Conference, Norristown, Pa., January 1979.

3. W.L. White, "Incest in the Organizational Family: The Unspoken Issue in Staff and Program Burnout," paper presented at the 1978 Alcohol and Drug Problems Association of North America's 29th Annual Meeting, Seattle, Wash., September 1978a; W.L. White, "A Systems Response to Staff Burn-out," paper presented for the Staff Development Workshop of the National Manpower and Training System, Windson Locks, Conn., September 1978b.

4. Jones, supra note 2.

5. C. Maslach, "Burned-Out," 5 Human Behavior 16-22 (1976).

6. D.J. Ottenberg, "Staff Burnout," paper presented at the 2d Annual Drug and Alcohol Abuse Conference, Hershey, Pa., October 1978.

7. S. Shubin, "Burn-Out: The Professional Hazard You Face in Nursing," 8 Nursing 22-27 (1978).

8. A. Pines and C. Maslach, "Characteristics of Staff Burnout in Mental Health Setting," 29 Hospital and Community Psychiatry 233 (1978).

9. H.J. Freudenberger, "The Staff Burn-Out Syndrome in Alternative Institutions," 21 Psychotherapy: Theory, Research and Practice 73-82 (1975).

10. T. Morris, "Is Staff Burn-Out Occurring at the Partial Hospitalization Gateway?" unpublished paper, December 1978.

11. White, supra note 3a, at 4.

12. Id. at 6.

13. White, supra note 3b, at 1.

14. S.J. Smits, "Beyond 'Burnout,'" 3 Journal of Rehabilitation Administration 2-3 (1979).

15. Freudenberger, supra note 9.

16. Id.

17. Jones, supra, note 2.

18. W. Ryan, Blaming the Victim (New York: Pantheon, 1971).

19. Freudenberger, supra note 9.

20. White, supra note 3.

21. Freudenberger, supra note 9.

22. Smits, supra note 14.

23. Freudenberger, supra note 9.

24. Jones, supra note 2.

25. Shubin, supra note 7.

26. Jones, supra note 2.

27. Id.

28. White, supra note 3.

29. Freudenberger, supra note 9.

30. Ottenberg, supra note 6.

31. Shubin, supra note 7.

32. Freudenberger, supra note 9.

33. H.A. Otto, "Toward a Holistic Treatment Plan," in H. Greenwald (ed.), Active Psychotherapy (Chicago: Aldine, 1967); H.A. Otto and J. Mann (eds.), Ways of Growth (New York: Grossman, 1968); H.A. Otto, Group Methods to Actualize Human Potential (Beverly Hills, Calif.: The Holistic Press, 1970).

34. Pines and Maslach, supra note 8.

35. Id.

36. White, supra note 3.

37. Id.

38. J.W. Gardner, "Continuous Renewal: Best Route to Orderly Social Change?" The Philadelphia Inquirer, Dec. 15, 1968, at section 7, p.1.

39. Freudenberger, supra note 9.

PREVENTION PROGRAM MANAGEMENT

POST-TEST

General Instructions

Consider the following questions a quick review of the training you have just completed. The terms and concepts will now seem more familiar to you. DO NOT linger over any single item: answer quickly and move on. Mark your answers on the answer sheet provided.

I. MATCHING

A. Match the appropriate item to the statement provided. More than one selection may be necessary to adequately respond to the question.

Choose the definition that best identifies the model described below:

a. Sherwood Model
b. Situational Leadership Approach Model
c. Program Development Logic Model

1. This strategy encourages individuals and organizations to develop mechanisms for accommodating and utilizing changes in programs, staff, and funding.

2. Matches managerial style to group readiness levels through the use of a four-quadrant matrix.

B. Match the appropriate definition to the following behavior identified below:

a. "Structuring Behavior"
b. "Climate-Setting Behavior"
c. "Transferring Behavior"

3. Builds trust among group members and between the group and him or herself.

4. Provides opportunities for group members to develop and use their abilities.

5. Establishes patterns and channels of communication among group members.

C. Match the correct item to the situation provided below.

a. Objectives
b. Criteria
c. Measures

6. Sales of sedative-hypnotic drugs at pharmacies serving a retirement community will diminish within 6 months.

7. A 20 percent decrease in the use of sedatives and alcohol.

8. Use of psychoactive prescription drugs and alcohol.

D. Match the correct items to the situation provided below.

a. Facts
b. Opinions
c. Assumptions

9. Prevention efforts should be targeted toward the black population since they are generally the heroin addicts.

10. Prevention efforts have been ineffective.

11. High school students are more inclined to try marijuana since it is so readily available.

E. The definitions to the following types of evaluation are listed below. Match the correct definition to the evaluation.

a. Impact
b. Process
c. Outcome

12. Attempts to capture in "still frame" the characteristics of an operational, ongoing prevention program.

13. Attempts to answer program concerns in accomplishing its own objectives.

14. Attempts to gauge additive effects of numerous drug abuse prevention programs within a geographic boundary.

II. MULTIPLE CHOICE

Choose the correct answer(s) to the following questions and circle the appropriate letter(s) on the answer sheet.

15. Effective collaboration between individuals in different agencies is based on:

    a. Friendly but fair competition for clients or funding
    b. Establishing a satisfying, reciprocal relationship
    c. Awareness of the value of collaboration
    d. All of the above

16. The items listed below are all approaches for evaluating referral services in a prevention program, EXCEPT:

    a. Improvement of client's self-concept
    b. Enrollment in support groups for families of alcoholics
    c. Decrease in the client's group scores on drug abuse interest surveys
    d. Number of clients who list referral services as a source of information on enrolling in other prevention services

17. When planning a program evaluation:

    a. Program staff should help to develop objectives and criteria.
    b. Program staff participation in evaluation planning violates the objectivity of the evaluation.
    c. Evaluation data should be collected using special procedures and personnel separate from routine program procedures.
    d. Measurements of effect should always be made at the end of the program service.

18. When preparing to address or actually addressing a local funding source, one should:

    a. Use your staff to help you gain support for your programs or to prepare for your presentation.
    b. Read magazine articles and attend public meetings to learn appropriate procedures and protocol.
    c. Make your program "saleable" and "understandable" to the public.
    d. All of the above.

III. TRUE or FALSE

The following statements are related to aspects of prevention program management. Please circle either "True" or "False" on the answer sheet.

19. A good proposal for funding would concentrate on a problem statement and a strategy design for examining the problem.

20. A staff with a low readiness level needs structure from the manager.

21. In following action planning procedures, one would use the Sherwood Model.

22. Staff burnout emanates from problems of interaction between the individual and his or her environment.

23. When planning a program evaluation, the evaluation data should ideally be collected using special procedures.

24. Networks are intended to be task-oriented, competitive, and decentralized learning systems.

25. Primary prevention is a constructive process designed to intervene in patterns of drug use and experimentation.

POST-TEST

Answer Sheet

Circle the correct response(s)

I. MATCHING

1.	a	b	c
2.	a	b	c
3.	a	b	c
4.	a	b	c
5.	a	b	c
6.	a	b	c
7.	a	b	c
8.	a	b	c
9.	a	b	c
10.	a	b	c
11.	a	b	c
12.	a	b	c
13.	a	b	c
14.	a	b	c

II. MULTIPLE CHOICE

15.	a	b	c	d
16.	a	b	c	d
17.	a	b	c	d
18.	a	b	c	d

III. TRUE or FALSE

19.	True	False
20.	True	False
21.	True	False
22.	True	False
23.	True	False
24.	True	False
25.	True	False

*U.S. GOVERNMENT PRINTING OFFICE: 1981-0-720-038/5715

TRAINING STAFF QUALIFICATIONS

- This course is designed to be delivered by at least two (preferably three) trainers regardless of the size of the participant group.

- The training team that delivers the course should include an experienced prevention program manager and at least one other trainer who is a drug abuse prevention professional. Training team members should have demonstrated training and experience in training adult learners.

- The major consideration in determining a training team for delivery of this course is that the competency of the staff, as a whole, include: competence and experience in management and planning, ability to plan and work together, and an understanding of how individuals learn.

DESIRABLE PREREQUISITE TRAINING COURSES

- Community-Based Prevention Specialist
- Basic Management Skills
- Training of Trainers

SPACE AND EQUIPMENT REQUIREMENTS

- This course requires at least one large work room equipped with chairs and tables or chairs and a suitable writing surface. The room should be sufficiently large so that participants are uncrowded and comfortable. The program also requires at least two small work rooms or a number of small rooms sufficient to accommodate small work groups.

- Other materials required are:

  - Trainer Manuals
  - Participant Manuals
  - Newsprint
  - Magic Markers
  - Masking Tape
  - Pencils

EVALUATION

Two standards are used to determine each participant's performance in this course: (1) attendance and (2) score on the post-test. Participants who are certified as having successfully completed the course should have been present a minimum of 90 percent of the time allotted for the course sessions and achieve a minimum score of 75 percent on the post-test.